

Von Braun Center

700 Monroe Street · Huntsville, AL 35801 · 256-533-1953 · www.vonbrauncenter.com

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

APPLICANT INFORMATION

DATE: _____

Last Name		First Name		Middle Initial	
Current Address			City	State	Zip
Permanent Address (if same as above, write "same")			City	State	Zip
Telephone Number (Home)		Cell Phone Number		E-Mail Address	
Are you 18 years of age or older? YES NO		Are you legally eligible for employment in the U.S.? YES NO			
Have you ever been convicted of a felony? YES NO					
Can you work any shift? YES NO			Can you work weekends? YES NO		

EMPLOYMENT

Position Applying for		Date Available	Salary / Wage Desired
Are you employed now? YES NO		If yes, may we contact your employer? YES NO	
Have you ever been employed by us? YES NO		If Yes, list department and year:	
Referred By			

EDUCATION

	Name and Location of School	No. of Yrs. Attended	Did you graduate?	Subjects Studied
High School				
College				
Trade, Business or Correspondence School				

(CONTINUED ON THE OTHER SIDE)

Do Not Write Below This Line

For VBC Use Only

Hired: YES NO	Position: _____	Dept: _____
Salary/Wage: _____		
Date Reporting to Work: _____		Processing Date: _____
Approved: 1. _____	2. _____	
Hiring Manager	Department Director	
3. _____	4. _____	
Human Resources Manager	CEO	

GENERAL

Special Skills:

U.S. Military or Naval Service YES NO	Rank	Present Membership in National Guard or Reserve
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PREVIOUS EMPLOYMENT *(List last three employers, starting with the most recent)*

Date Month / Year	Employers Name Address and Phone Number	Salary/Wage	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				

Which of these jobs did you like the best?

What did you like most about this job?

REFERENCES *(Give names of three persons not related to you, whom you have known at least one year)*

Name	Address	Business	Years Acquainted	Phone Number
Name	Address	Business	Years Acquainted	Phone Number
Name	Address	Business	Years Acquainted	Phone Number

EMERGENCY CONTACT *In case of emergency, please notify:*

Name & Relationship	Address	Phone Number

APPLICANTS STATEMENT *(Please read and initial each statement then sign)*

"I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and , if I am employed, my employment may be terminated at any time." *(Initial here)* _____

"I understand that nothing in this application creates an employment contract or relationship. I also understand that if hired by the Von Braun Center, my employment can be terminated at any time, by myself or the Von Braun Center, for any grounds not prohibited by law." *(Initial here)* _____

" I authorize the reference list to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you" *(Initial here)* _____

To comply with the Federal Immigration Reform and Control Act, the Von Braun Center requires all new hires to show proof of their eligibility to work in the United States. Failure to produce the required documents will cause the Von Braun Center to withdraw its job offer and terminate an individual's employment. *(Initial here)* _____

This application for employment shall be considered active for a period of time not to exceed six months. Any applicant wishing to be considered for employment beyond this time should re-submit a new application after such time has expired. *(Initial here)* _____

_____ **Date**

_____ **Signature**