

PfC Partners for Community

EMPLOYMENT APPLICATION

Applicants for employment are considered without regard to any basis prohibited by law including race, color, religion, sex, marital status, national origin, age or non-job-related handicap. In Massachusetts employers may not base hiring or employment decisions upon a person's sexual orientation, genetic information or their status as a member of uniformed (military) services. Also, it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

I am applying for a position with the following affiliate:

- Corp. for Public Management
 Corp. for Justice Management
 Partners for Community
 New England Farm Workers' Council
 Brightwood Development Corp.
 Other: _____

I am applying for the position of: _____

Date: _____

I understand that my application is only active for this current opening and I must re-apply for other positions when they become available.

I heard about this position:
 In an ad
 From a friend
 On PfC's website
 On PfC's "Jobline"
 From an agency
 From an online job site
 From an employee
 Other

APPLICANT INFORMATION – Please print/type CLEARLY

Name: _____

Address: _____

City _____ State _____ Zip Code _____ Telephone (including area code): _____

Are you under 18 years of age? Yes No | If yes, can you furnish a work permit? Yes No

Have you filed an application here before? Yes No | If yes, when? Date: _____

Are you currently employed? Yes No | May we contact your current employer? Yes No

Are you legally eligible for employment in the United States?
 (***Please note that proof of citizenship or immigration status will be required upon employment***)
 Yes
 No

Are you related to anyone currently employed by PFC or one of its affiliates? Yes No

If yes, please identify: _____

When would you be available for work? _____ Date: _____

Work availability: Full-time
 Part-time
 Per diem
 Temporary

Shift preference: 1st shift
 2nd shift
 3rd shift | Prefer: Weekdays
 Weekends

Are you on lay-off and subject to recall? Yes No | Can you travel if a job requires it? Yes No

MILITARY SERVICE

Are you a veteran of the U.S. Military Service? Yes No | If yes, branch? _____

Please describe any special skills or training acquired while in the service:

LANGUAGE SKILLS – Voluntary Information Only

If you speak, read and/or write in any language other than English, you are invited to volunteer the following information (the purpose is only to provide information which would have a favorable effect upon consideration of this application for employment since additional language skills may be a desired ability).
You are not required to provide this information.

Please identify language(s): _____ *Speak:* Fluently
 Good
 Fair

Read: Fluently
 Good
 Fair
 Write: Fluently
 Good
 Fair

PROFESSIONAL/SUPERVISORY REFERENCES PREFERRED

Please give the name, address and telephone number of three references who are not related to you and are not previous employers.

Name	Address	Telephone Number

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military assignments or any verified work performed on a volunteer basis.
Please exclude organization names which indicate race, color, religion, sex or national origin.

Employer:	Dates Employed		Title
Address:	From	To	Responsibilities
Phone:	Rate/Salary		
Supervisor:			
Reason for Leaving:			

Employer:	Dates Employed		Title
Address:	From	To	Responsibilities
Phone:	Rate/Salary		
Supervisor:			
Reason for Leaving:			

Employer:	Dates Employed		Title
Address:	From	To	Responsibilities
Phone:	Rate/Salary		
Supervisor:			
Reason for Leaving:			

Employer:	Dates Employed		Title
Address:	From	To	Responsibilities
Phone:	Rate/Salary		
Supervisor:			
Reason for Leaving:			

If you need additional space, please continue on a separate piece of paper.

Please summarize any special skills or qualifications acquired from employment or other experience here:

EDUCATION

	Elementary	High School	College	Grad/Prof.
Name of school:				
Address:				
Years Completed:	<input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Diploma/Degree:				
Course of study:				

Describe specialized training, apprenticeship, skills and extra-curricular activities:

Honors Received:

APPLICANT CERTIFICATION AND RELEASE

I certify that the answers given by me to the foregoing questions and statements, and the facts contained in this application are true and complete and I understand and agree that any misrepresentation, omission of fact, or the giving of false or misleading information, by me in this application or at my interview, if any, will be sufficient cause for cancellation of this application, denial of employment, and/or dismissal from employment if I have been employed.

I agree that during any employment for Partners for Community, Inc. (PFC) and any of its affiliated corporations and at any time thereafter, I will not use, transfer, sell, reveal, or disclose any of PFC's trade secrets or other confidential information.

I give PFC and any of its affiliated corporations the right to investigate all references and all statements contained herein and to secure additional information about me, personal, medical or otherwise, including all information concerning my previous employment, education, activities, character and qualifications. I authorize PFC and any of its affiliated corporations to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of any such investigative report that is made.

I hereby release PFC and all other persons, corporations, organizations, schools, or other entities including my former employers, for furnishing such information, from all liability for any damage or injury resulting therefrom.

I UNDERSTAND THAT THIS APPLICATION IS NOT AND IS NOT INTENDED TO BE A CONTRACT OF EMPLOYMENT, THAT IF HIRED, MY EMPLOYMENT IS AT WILL, AND, THAT JUST AS I AM FREE TO RESIGN AT ANY TIME, PFC AND ITS AFFILIATES RESERVE THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE. I UNDERSTAND THAT NO REPRESENTATIVE OF PFC HAS THE AUTHORITY TO MAKE ANY ASSURANCES, OR ENTER INTO ANY WRITTEN OR VERBAL EMPLOYMENT CONTRACTS, ON BEHALF OF PFC TO THE CONTRARY, WITHOUT THE EXPRESS WRITTEN CONSENT OF THE PRESIDENT OF PFC.

Signature of Applicant:	Date:	
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APPLICANT DATA RECORD
Completion of this form is voluntary on your part.

Applicants are considered for all positions, and employees are treated during employment without regard to any basis prohibited by law including race, color, religion, sex, national origin, age, marital or veteran status, or non-job-related handicap.

As employers/government contractors, we comply with government regulations and affirmative action responsibilities.

Solely to help us comply with government record keeping, reporting and other legal requirements, please fill out this Applicant Data Record.

Failure to provide this information will not jeopardize or adversely affect any consideration you may receive for employment. We appreciate your cooperation.

This data is for periodic government reporting and will be kept in a **Confidential File** separate from the Application for Employment.

PLEASE PRINT

Date:	Position applied for:
Referral Source:	<input type="checkbox"/> In an ad <input type="checkbox"/> From a friend <input type="checkbox"/> On Pfc's website <input type="checkbox"/> On Pfc's "Jobline" <input type="checkbox"/> From an agency <input type="checkbox"/> From an online job site <input type="checkbox"/> Other

AFFIRMATIVE ACTION SURVEY

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applicants. This data is for analysis and affirmative action only. Submission of information about handicap is voluntary.

Check one: Male Female

Check one of the following choices:

<input type="checkbox"/> Black	(not of Hispanic origin) – persons having origins in any of the black racial groups.
<input type="checkbox"/> Hispanic	Persons of Mexican, Puerto Rican, Central or South American or other Spanish culture or origin.
<input type="checkbox"/> White	(not of Hispanic origin)
<input type="checkbox"/> American Indian Alaskan Native	Persons having origins in any of the original peoples of North America, and who maintain a cultural identification through tribal affiliations or community recognition.
<input type="checkbox"/> Asian Pacific Islander	Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

Check if any of the following are applicable:

Vietnam Era Veteran Disabled Veteran Person with a disability

**SPECIAL EMPLOYMENT NOTICE TO:
Disabled Veterans, Vietnam Era Veterans, and Individuals with Physical or Mental Handicaps**

Government contractors are subject to Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which requires government contractors to take affirmative action to employ and advance in employment qualified disabled individuals.

If you are a disabled veteran, or have a physical or mental disability, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect any consideration you may receive for employment.

If you wish to be identified, please sign below.

Person with a disability Disabled Veteran Vietnam Era Veteran

Signed: _____

Date: _____

FOR HUMAN RESOURCE DEPARTMENT USE ONLY

Position(s) applied for is open: Yes No

Position(s) considered for:

Signature: _____

Date: _____