



# Employment Application

Equal Opportunity/AA Employer

**SUBMIT APPLICATION BY:**

Fax (888) 906-7488  
Email [jobs@communityactionam.org](mailto:jobs@communityactionam.org)  
Mail Attention: Human Resources  
Community Action Alger Marquette  
1125 Commerce, Marquette, MI 49855

**FOR INFORMATION ON POSTIONS:**

Website [www.communityactionam.org](http://www.communityactionam.org)

Date of Application \_\_\_\_\_

Position(s) applying for \_\_\_\_\_

Type of Employment: Full-time \_\_\_ Part-time \_\_\_ Sub \_\_\_ Temp \_\_\_

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First Name \_\_\_\_\_ LastName \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Have you previously applied for employment with Community Action Alger Marquette? Y or N  
If yes, give date \_\_\_\_\_

Were you previously employed with Community Action Alger Marquette? \_\_\_\_\_ If yes, give  
date \_\_\_\_\_

Have you been convicted of a felony in the last seven (7) years? \_\_\_\_\_ (Such conviction may be relevant if  
job related, but does not bar you from employment.)

If you answered yes to the conviction of a felony, please  
explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you a Head Start Parent? \_\_\_\_\_ If yes, when was your child enrolled in Head Start?  
\_\_\_\_\_  
\_\_\_\_\_

Does Community Action Alger Marquette currently employ anyone related to you? \_\_\_\_\_ If yes, what  
position does that person hold? \_\_\_\_\_

Are you currently related to any person on the Community Action Alger Marquette Board of  
Directors? \_\_\_\_\_

Have you lived in Michigan for the past ten (10) years?\_\_\_\_\_ If no, what state(s) did you reside in and for how long?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Prior Employment Information – List your last three (3) employers, starting with the most recent.**

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Company Name \_\_\_\_\_ May we contact this employer? Y N

Company Phone \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Company Start Date \_\_\_\_\_ Company Leave Date \_\_\_\_\_

Highest Wage \_\_\_\_\_

Why did you leave this employer? \_\_\_\_\_

Company Job Titles/Duties \_\_\_\_\_

\_\_\_\_\_

Company Name \_\_\_\_\_ May we contact this employer? Y N

Company Phone \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Company Start Date \_\_\_\_\_ Company Leave Date \_\_\_\_\_

Highest Wage \_\_\_\_\_

Why did you leave this employer? \_\_\_\_\_

Company Job Title/Duties \_\_\_\_\_

\_\_\_\_\_

Company Name \_\_\_\_\_ May we contact this employer? Y N

Company Phone \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Company Start Date \_\_\_\_\_ Company Leave Date \_\_\_\_\_

Highest Wage \_\_\_\_\_

Why did you leave this employer? \_\_\_\_\_

Please explain any period of time not accounted for in your employment information.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all special skills which you want us to consider in evaluating your qualifications (ie. Degrees, Computer skills, training, certifications, etc.)

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## Education Information

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School Name \_\_\_\_\_ Type of School \_\_\_\_\_

School City \_\_\_\_\_ School State \_\_\_\_\_ School Zip \_\_\_\_\_

School Degree \_\_\_\_\_ Currently attending this school? \_\_\_\_\_

# of years attended \_\_\_\_\_ Graduated? \_\_\_\_\_ GPA \_\_\_\_\_

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School Name \_\_\_\_\_ Type of School \_\_\_\_\_

School City \_\_\_\_\_ School State \_\_\_\_\_ School Zip \_\_\_\_\_

School Degree \_\_\_\_\_ Currently attending this school? \_\_\_\_\_

# of years attended \_\_\_\_\_ Graduated? \_\_\_\_\_ GPA \_\_\_\_\_

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School Name \_\_\_\_\_ Type of School \_\_\_\_\_

School City \_\_\_\_\_ School State \_\_\_\_\_ School Zip \_\_\_\_\_

School Degree \_\_\_\_\_ Currently attending this school? \_\_\_\_\_

# of years attended \_\_\_\_\_ Graduated? \_\_\_\_\_ GPA \_\_\_\_\_

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## Professional References

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List individuals who are not related to you and who are able to evaluate your professional knowledge and ability. These may be individuals from your past and/or current employers.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

**IMPORTANT, PLEASE READ CAREFULLY**

**Applicant/Employee Verification, Authorization and Release**

I authorize Community Action Alger Marquette to investigate all statements contained in this application (and accompanying resume, if any). I also authorize Community Action Alger Marquette to conduct a background check which may include, without limitation, contacting past employers and references, conducting an investigation of my personal history, a Department of Human Services Clearance, a National Sex Offenders Registry Clearance and a criminal background check

I understand that applicants who misrepresent or omit any material facts on this application or during any subsequent interview may not be hired or if hired, and found to have made a misrepresentation may be terminated immediately and I agree that Community Action Alger Marquette shall not be held liable in any respect if I am not hired or terminated for that reason. If employed, I agree to observe all rules, regulations, policies and procedures of Community Action Alger Marquette.

All Community Action Alger Marquette employees are at-will employees.

Neither this employment application nor any of the company's policies or procedures shall be considered a contract or guarantee of employment or continuation of employment. I understand this application is only current for 180 days. At the conclusion of this time, if I have not heard from Community Action Alger Marquette and still wish to be considered for employment, it will be necessary to update this application.

Printed Name \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date Signed \_\_\_\_\_