

CONCERTED SERVICES, INCORPORATED WAYCROSS, GEORGIA

APPLICATION FOR EMPLOYMENT

Acceptance of this application does not imply employment even though every requirement has been complied with. Should we have a position available, your application will be considered along with others on file with us. If this application is not renewed within three (3) months, we will regard it as withdrawn. In considering your application for employment, CSI does not discriminate because of your religion, sex, age, nationality, color, race, disability, or marital status. We are, however, interested in your ability, experience, education, and over-all qualifications for employment; with these thoughts in mind, please fill in the following questionnaire.

		PERSONAL					
NAME:Last	First	Middle		DATE:_	TE:		
PRESENT ADDRESS:	Street	City	State		Zip Code		
PHONE NO.:			itions have a minimuge will be verified fo		as specified by the funding s.		
CELL PHONE NO.:		EMAIL AD	DDRESS:				
Position/County for which you	are applying? _						
If selected for employment with	th this agency, ho	ow soon could you i	report for wor	k?			
The agency nepotism policy re of interest or direct or indirect				ment does no	ot create a conflict		
Are you related to anyone con	nected with Cond	certed Services, Inc.	.? □ Yes	□ No			
If yes, relative's name and rela	tionship:						
Can you perform the essential	functions of the	job for which you h	ave applied?	□ Yes □ N	No		
Have you ever been convicted Explain:			☐ Yes	□ No			
Have you ever been arrested o	r charged for dor	mestic violence or c	hild abuse?	□ Yes □	No		
Please list any and all language							

Education

	Elementary School			High School			Undergraduate College/University			Graduate/ Professional							
School Name and Location																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Study																	
State any additional information you feel may be helpful to us in considering your application.																	

List professional, trade, business or civic activities, and offices held.
You may exclude membership which would reveal sex, race, religion, national origin, age, color, disability, marital or other protected status:
If you need additional space, please continue on a separate sheet of paper.
Special Skills and Qualifications
Summariza special job related skills and qualifications acquired from employment or other experience
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Employment Experience

ALL APPLICANTS MUST COMPLETE ENTIRE APPLICATION.

After completion of application, resume may be attached.

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You are not required to include organizations which indicate race, color, religion, sex, national origin, age, disability, marital, or other protected status. List employment for the last ten (10) years. Any gaps in employment must be explained. Example: attend school, stay at home, etc.

1.	Employer		Dates E	mployed	Work Dorformed		
			From	То	Work Performed		
	Address						
	Telephone Number(s)		Hourly R	ate/Salary			
	Job Title	Supervisor	Starting	Final			
	Reason for leaving	•					
2.	Employer		Dates E	mployed	W. I. D. Com I		
			From	То	Work Performed		
	Address						
	Telephone Number(s)		Hourly R	ate/Salary			
	Job Title	Supervisor	Starting	Final			
	Reason for leaving						
3.	Employer		Dates E	mployed	Work Performed		
			From	То	WOIK FEITOITHEE		
	Address						
	Telephone Number(s)		Hourly R	ate/Salary			
	Job Title	Supervisor	Starting	Final			
	Reason for leaving						
4.	Employer		Dates E	mployed	Work Performed		
			From	То	WOIK FEITOITHEU		
	Address						
	Telephone Number(s)		Hourly R	ate/Salary			
	Job Title	Supervisor	Starting	Final			
	Reason for leaving						
5.	Employer		Dates E	mployed	Work Performed		
			From	То			
	Address						
	Telephone Number(s)		Hourly R	ate/Salary			
	Job Title	Supervisor	Starting	Final			
	Reason for leaving						
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References

List three people to whom we may refer. Or	mit relatives and former e	mployers.						
NAME	ADDR	FSS	PHONE NO.					
1.	ADDR	Lbb	THORE IVO.					
2.								
3.								
	Miscella	neous						
Are you presently employed?	☐ Yes ☐ No							
Are you presently on layoff status?								
Have you ever been discharged or requested to resign? ☐ Yes ☐ No								
May we communicate with your pre		☐ Yes ☐ No	□ Yes □ No					
IMPORTANT – PLEASE READ BEFORE SIGNING								
I understand that as a condition of employment I may be subject to drug screening, as well as periodic random drug testing, should I be employed.								
I understand, if selected for employment, I will be required to submit verification of legal right to work in the United States.								
I agree that, should I be employed, such employment shall be subject to satisfactory work performance. If CSI finds that I am not adapted to the work, or am otherwise not satisfactory, my employment will be terminated. I also agree to be subject to the established rules and regulations governing Concerted Services, Inc.'s Personnel Policies and Procedures.								
I understand and agree that in processing this employment application, I may be required to submit to a criminal investigation check.								
I hereby certify that the answers given by me to all questions on this application are true and correct to the best of my knowledge and belief and that I have not knowingly withheld any facts or circumstances that might, if disclosed, affect my application unfavorably. I understand that failure to do so may result in immediate termination if employed.								
I hereby acknowledge that I read the	foregoing disclosure	and understand tl	ne same.					
SIG	NATURE OF APPI	LICANT						
		DATE						