CENTER AGAINST SEXUAL AND FAMILY VIOLENCE 580 GILES EL PASO, TEXAS 79915 (915) 593-1000

APPLICATION FOR EMPLOYMENT

CASFV is an equal opportunity employer and make employment decisions without regard to race, color, religion, sex, national origin, citizenship, age, disability, sexual orientation, gender identity or any other protected trait. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on any basis prohibited by local, state, or federal law. If you need an accommodation in completing this application, please notify a representative of the organization.

PERSONAL INFORMATION

Applicant Name (Last, First, Middle):	Application Date:
Social Security No:	Phone No.: ()
Address (Street, City, State, Zip Code):	
Mailing Address (if different than above):	
Are you legally eligible to work in the U.S.? How were you referred to use Yes D No D	SŚ
During the past five years, have you been convicted of, or have y a felony offense?	ou pleaded guilty or no contest to,
If yes to the question above, please explain (Use more paper, if necessar	ry):

EMPLOYMENT DESIRED

Position Desired:	Earliest Date Type of Employment Desired: (Circle (You Can Start:		ed: (Circle One)	
		Full-Time	e Part-Time	Temporary
Do you have any objection to the following:	Working overtim	e:	Yes 🗆 No 🗆	
	Working evening	g shifts:	Yes 🗆 No 🗆	
	Working weeker	nds:	Yes 🗆 No 🗆	

EMPLOYMENT HISTORY

Are you presently employed? Yes D	D	May we contact your cu	urrent emplo	yer: Yes 🗆 No 🗆
Name of Current Employer:				
Address of current employer:				
Position Held:	Rate c	of Pay	Dates of I	Employment:
			From	То
Immediate Supervisor:		Contact Number: ()	
Reason for Leaving				

Please provide all employment information for your past three employers (use more paper, if necessary):

Employer:		
Address:		
Position Held:	Rate of Pay	Dates of Employment: From To
Immediate Supervisor:	Contact Numbe	r: ()
Reason for Leaving:		Eligible for Re-Hire: Yes 🗆 No 🗆

Employer:		
Address:		
Position Held:	Rate of Pay	Dates of Employment: From To
Immediate Supervisor:	Contact Numbe	r: ()
Reason for Leaving:		Eligible for Re-Hire: Yes 🗆 No 🗆

Employer:		
Address:		
Position Held:	Rate of Pay	Dates of Employment: From To
Immediate Supervisor:	Contact Numbe	r: ()
Reason for Leaving:		Eligible for Re-Hire: Yes 🗆 No 🗆

EDUCATIONAL HISTORY

Name and Location of School	Number of Years Attended	Degree or Years Completed

OTHER SKILLS AND QUALIFICATIONS

Summarize any job-related training, skills, knowledge, licenses, certifications, and any other information you believe is relevant to your qualifications for this job (use more paper, if necessary):

How did you hear about this position?	
Why are you interested in working for CASEV? _	

REFERENCES

Please list three references not related to you, whom you have known for at least one year.

Name	Address	Phone Number	Years Acquainted

CERTIFICATION & RELEASE

I certify that I have fully and accurately answered all questions and have given all information requested in this application for employment. I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I understand that all such information is subject to verification by the potential employer, and hereby give my consent to the potential employer to investigate my background and qualifications.

I understand that any intentional misrepresentation or material omission made by me on this application or during the hiring process may disqualify me from further consideration for employment or, if discovered after I am hired, may be grounds for my immediate termination, without notice, whenever it may be discovered.

I understand that this is a drug free workplace and consent to compliance with this policy as a condition of employment. I agree to undergo any type of drug and/or alcohol testing that the potential employer may require at any time. I also understand I will be required to pass a criminal background investigation and that failure to do so will result in termination.

I also understand that, if I am hired, I will be required to provide satisfactory proof of identity and legal work authorization within three days of my hire. Failure to submit such proof within the required time shall result in immediate termination of employment. I understand, if hired, I am required to abide by all CASFV's rules, policies and procedures.

I understand that this application shall be consider active for a 45-day period.

I understand that submission of this application does not necessarily mean that I will be hired. If I am hired, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. I understand that no company representative, other than its owner, can enter into any employment contract with me and any such contract must be in writing and signed by both parties. Accordingly, either I or my employer can terminate the relationship at-will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I further understand and agree that any dispute regarding my application for employment, including without limitation, failure to receive a job offer, rescission of any pending job offer or any subsequent employment I may obtain with the company will be subject to binding arbitration, as set forth in the Mutual Agreement to Arbitrate Claims, to the fullest extent allowed by applicable state and federal law. I have read and fully understand the foregoing statements and I seek employment under the conditions set forth above.

Signature of Applicant	Date	
DO NOT WRITE BELOW	V THIS LINE- FOR INTERNAL US	E ONLY
Date of Receipt of Application:	Received By:	
Interviewed By:	Date of Intervi	ew:
Hired: Yes No Date of Hire:	Position:	Wage:
Approved:		