



202 East Bagley Road  
 Berea, Ohio 44017-2090  
 Phone: 440/234-2006

VALID AND ACTIVE FOR A PERIOD OF 30 DAYS

**APPLICATION FOR EMPLOYMENT**  
 PLEASE PRINT

**PERSONAL**

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

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP CODE

Phone No. \_\_\_\_\_ Social Security No. \_\_\_\_\_  
AREA CODE

In Emergency Notify \_\_\_\_\_  
(Name) (Relation) Home Telephone (\_\_\_\_) \_\_\_\_\_  
 \_\_\_\_\_  
(Address)  
 \_\_\_\_\_  
(City) (State) (Zip) Business Telephone (\_\_\_\_) \_\_\_\_\_

Is there anything which would limit your ability to perform all the essential duties of the position for which you are applying?  
 \_\_\_\_\_

Have you ever been bonded? \_\_\_\_\_ If yes, on what jobs? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

If yes, describe in full and include dates: \_\_\_\_\_

State licensing laws require minimum age requirements for certain positions. Do you meet the following requirements:

Are you over the age of eighteen? \_\_\_\_\_ Are you over the age of twenty-one? \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ Any moving violations/accidents/points on that license? \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ . Rate of pay expected \$ \_\_\_\_\_ per week.

Would you work Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ . Specify days and hours if part-time \_\_\_\_\_

When would you be available for work? \_\_\_\_\_

If employed, does this agency have your permission to use photographs which may have been taken during the course of your employment for publications related to the work of the agency? \_\_\_\_\_ Yes \_\_\_\_\_ No

**EDUCATION**

School	Name and Address of School	Course of Study	Check Last Year Completed				Did You Graduate?	List Diploma or Degree
			1	2	3	4		
High	_____	_____	1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	_____							
	_____							
College	_____	_____	1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	_____							
	_____							
Other (Specify)	_____	_____	1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	_____							
	_____							