



**Application for Employment**

**PLEASE PRINT.** Complete the entire application. You may attach a resume, but must complete all questions.

Date:	Name (First, Middle, Last):		
Street Address:		City, State & Zip:	
Home Phone:	Mobile Phone:	Email Address:	
Are you eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Desired Hours: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>	
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Desired Position:	
Are you presently employed at National Children's Museum?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, what is your current job title & department?	
Have you previously been employed at the National Children's Museum?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, dates of employment & reason for leaving:	
Are you related to any current employees	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, their name & their relationship to you?	
Have you ever been convicted of a felony or misdemeanor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, Explain	
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, List State of issuance, license number, and expiration date:	
How did you learn about this employment opportunity at National Children's Museum? Check all that apply: <input type="checkbox"/> Newspaper <input type="checkbox"/> Walk-in <input type="checkbox"/> Dept. of Labor <input type="checkbox"/> Website <input type="checkbox"/> Employee Referral <input type="checkbox"/> Other: _____			

**EDUCATION**

Name of School	City/State	Did you graduate?	If Yes, Degree received	Major
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Vocational or Trade School:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College or University:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College or University:		<input type="checkbox"/> Yes <input type="checkbox"/> No		

**AVAILABILITY:** Indicate the days and times you are available for work

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
To:							

*Applications will receive consideration for positions without regard to race, color, religion, age, sex, religion, national or ethnic origin, disability, age, veteran status or sexual orientation.*

**SKILLS:** Please list all relevant technical, clerical, or trade skills. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert)


**WORK EXPERIENCE-** List all positions held during the past seven years. Do not indicate "See Resume."

Dates Employed (most recent) From: To	Organization Name and Address:	Title:
Starting Salary:	Primary Duties:	
Final Salary:		
Supervisor's Name, Title and Phone #:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed From: To :	Organization Name and Address:	Title:
Starting Salary:	Primary Duties:	
Final Salary:		
Supervisor's Name, Title and Phone #:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed From: To:	Organization Name and Address:	Title:
Starting Salary:	Primary Duties:	
Final Salary:		
Supervisor's Name, Title and Phone #:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed From: To:	Organization Name and Address:	Title:
Starting Salary:	Primary Duties:	
Final Salary:		
Supervisor's Name, Title and Phone #:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed From: To:	Organization Name and Address:	Title:
Starting Salary:	Primary Duties:	
Final Salary:		
Supervisor's Name, Title and Phone #:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

**ACKNOWLEDGMENT:**

**PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.**

I certify that the information on this application and any supporting documents are accurate and complete. I understand and agree that providing false and misleading information represents grounds for elimination from consideration for employment or discharge. I authorize National Children's Museum to investigate my background to determine my sustainability for employment. This investigation may include checking with schools, and employers I have identified, reviewing criminal conviction and driving records and verifying any other relevant information about me. I understand that nothing contained in this application, or the granting of an interview, is intended to be a contract of employment. I understand that staff employees of National Children's Museum serve at-will and the employment relationship may be terminated at any time by either party, for any reason, other than a reason prohibited by law.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_