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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Northeast Alabama Agri-Business Center LogoAPPLICATION FOR EMPLOYMENT | | | | | | | | | | | | | | | | | | | |
| **Position**  **Information** | Title of position for which you are applying: | | | | | | Desired salary: | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | Date of Application | |
| **Personal**  **Information** | Last Name | | | | | | | | | | | First Name | | | | | | Middle Initial | |
|  | | | | | | | | | | |  | | | | | |  | |
| Address | | | | | | City | | | | | | | | State | | | Zip | |
|  | | | | | |  | | | | | | | |  | | |  | |
| Are you 18 years of age or older?  YES NO | | | | | | | | | Are you legally eligible for employment in the U.S.? YES NO | | | | | | | | | |
| **Contact Information** | | | | | | | | | | | | | | | | | | |
| Phone: Home | | | Work | | | | Cell | | | | | | E-mail Address | | | | | |
|  | | |  | | | |  | | | | | |  | | | | | |
| High  School/  GED |  | | | | | | | | |  | | | | | | | |  |
| College |  | | | | | | | | |  | |  | | |  |  | |  |
| Other  (Specify) |  | | | | | | | | |  | |  | | |  |  | |  |
| **Employment History** | **Please list most recent employment experience first.** | | | | | | | | | | | | | | | | | | |
| Employer | | | | | | | | Telephone Number | | | | | | | Job Duties | | | |
|  | | | | | | | |  | | | | | | |  | | | |
| Address | | | | | | | | Dates of Employment | | | | | | |
|  | | | | | | | |  | | | | | | |
| Title | | Full-time | |  | Part-time | | | Hourly Rate/Salary | | | | | | |
|  | | | | | | | |  | | | | | | |
| Reason for Leaving | | | | | | | |  | | | | | | |
|  | | | | | | | |  | | | | | | |
| **Employment History (Continued)** | Employer | | | | | | | | Telephone Number | | | | | | | Job Duties | | | |
|  | | | | | | | |  | | | | | | |  | | | |
| Address | | | | | | | | Dates of Employment | | | | | | |
|  | | | | | | | |  | | | | | | |
| Title | | Full-time | |  | Part-time | | | Hourly Rate/Salary | | | | | | |
|  | | | | | | | |  | | | | | | |
| Reason for Leaving | | | | | | | |  | | | | | | |
|  | | | | | | | |  | | | | | | |
| **Employment History (Continued)** | Employer | | | | | | | | Telephone Number | | | | | | | Job Duties | | | |
|  | | | | | | | |  | | | | | | |  | | | |
| Address | | | | | | | | Dates of Employment | | | | | | |
|  | | | | | | | |  | | | | | | |
| Title | | Full-time | |  | Part-time | | | Hourly Rate/Salary | | | | | | |
|  | | | | | | | |  | | | | | | |
| Reason for Leaving | | | | | | | |  | | | | | | |
|  | | | | | | | |  | | | | | | |
| **Employment History (Continued)** | Employer | | | | | | | | Telephone Number | | | | | | | Job Duties | | | |
|  | | | | | | | |  | | | | | | |  | | | |
| Address | | | | | | | | Dates of Employment | | | | | | |
|  | | | | | | | |  | | | | | | |
| Title | | Full-time | |  | Part-time | | | Hourly Rate/Salary | | | | | | |
|  | | | | | | | |  | | | | | | |
| Reason for Leaving | | | | | | | |  | | | | | | |
|  | | | | | | | |  | | | | | | |
| **Employment History (Continued)** | Employer | | | | | | | | Telephone Number | | | | | | | Job Duties | | | |
|  | | | | | | | |  | | | | | | |  | | | |
| Address | | | | | | | | Dates of Employment | | | | | | |
|  | | | | | | | |  | | | | | | |
| Title | | Full-time | |  | Part-time | | | Hourly Rate/Salary | | | | | | |
|  | | | | | | | |  | | | | | | |
| Reason for Leaving | | | | | | | |  | | | | | | |
|  | | | | | | | |  | | | | | | |
| **May we contact your current employer?**  Yes No | | | | | | | | | | | | | | | | | | | |
| **Skills, Awards, Certificates or Professional**  **Activities** |  | | | | | | | | | | | | | | | | | | |
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| **Public Office or Public Service Positions** |  | | | | | | | | | | | | | | | | | | |
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**Note: Please provide details of each. May use a separate sheet if necessary.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **References** | **Please list three references, other than relatives, who can provide information verifying qualifications, character, or work experience.** | | | |
| Name and Title | Address (mailing and email) | | Phone Number |
| □ Professional  □ Personal |  | |  |
| □ Professional  □ Personal |  | |  |
| □ Professional  □ Personal |  | |  |
| **Felony**  **Conviction(s)** | Have you ever been convicted of or pled no contest or guilty to any felony or any crime involving theft, dishonesty, violence, or sexual misconduct? Yes No  If yes, explain below: | | | |
|  | | | |
|  | | | |
|  | | | |
| **Consent Agreement** | I represent and warrant that the information I have given on this application is full and true to the best of my knowledge and belief. I further acknowledge that I understand that I must provide documented verification of education, experience, and required certifications and/or licensures. And further, I represent and warrant that I have answered fully and truthfully all questions regarding criminal convictions/records. **I understand that any offer of employment is contingent upon a satisfactory criminal background investigation and I hereby authorize my employing authority within the Public Building Authority for the City of Rainsville and/or its assigns to conduct a criminal background history investigation. I further understand that I will be responsible for the cost of said criminal background check.** I hereby expressly request, and give permission to, former employers and any persons who may have pertinent information concerning this application to furnish such information to college officials. I agree to hold such persons harmless, and I do hereby release them from any and all liability for damage of any nature whatsoever for furnishing such information. I understand that failure to provide full and true information on this application may result in disqualification or dismissal. | | | |
| Signature of Applicant | | Date | |
|  |  | |  | |

Northeast Alabama Agri-Business Center

Public Building Authority

P.O. Box 100

Rainsville, AL 35986

256-638-1650

<http://nealagribusinesscenter.com/>

REQUEST, AUTHORIZATION, CONSENT, AND RELEASE

**FOR BACKGROUND INFORMATION**

By signing this authorization, I hereby authorize the Public Building Authority or its designee, to conduct criminal reference searches for felony and misdemeanor convictions at the statewide and national levels of every jurisdiction where I currently reside or where I have previously resided during the past seven years; national sex offender registry searches and a search of my driving record.

I understand that I may voluntarily consent to the use of my social security account number for the purpose of conducting a criminal background check. I further understand that my voluntary consent to use my social security account number is being requested for purposes of conducting a criminal background check, pursuant to the authority of the Public Building Authority regarding criminal background checks. I understand that neither the Public Building Authority nor any employing authority within the Public Building Authority will deny me any right, benefit or privilege provided by law because of my refusal to voluntarily consent to the use of my social security account number for the limited purpose of conducting a criminal background check.

\_\_\_\_\_I voluntarily consent to the use of my social security account number for the limited purpose

of conducting a criminal background check. Social Security #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_I do not consent to the use of my social security account number for the limited purpose of

conducting a criminal background check.

\_\_\_\_\_I consent to the use of my driver’s license number to be used for the limited purpose of

conducting a review of my driving history.

\_\_\_\_\_ I do not consent to the use of my driver’s license number for the limited purpose of

conducting a review of my driving history.

The information I have given in my employment application, interviews, and/or related resumes and documents is true, complete, and accurate.

I understand and agree that if employed, and/or during any period of employment, any false statements, misrepresentations of facts, or omission made by myself become known, my employment shall be subject to immediate termination.

I understand that in the event a conviction for a felony or any crime involving moral turpitude is found that the procedures established for the Board of Trustees policy concerning criminal background checks will be followed.

I have read and completely understand this release.

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Full Name\* (Please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Birthday: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Driver’s License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_