

EMPLOYMENT APPLICATION

CESI does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, national origin, age, disability, or any other characteristic protected by law.

APPLICANT INFORMATION									
REFERRAL SOURCE: Advertisement Employee Employment Agency Walk-In Other									
Today's Date Positi				Applied	for		Social Security No.		
Last Name				First			MI	Date	
Street Address							Apartment/Unit #		
City		State			ZIP				
Phone				E-mail Address					
Date Available		Desired Salary							
Are you currently employed? YES \(\Boxed{\square} \) NO \(\Boxed{\square} \) Are you over the age of 18? YES \(\Boxed{\square} \) NO \(\Boxed{\square} \)									
Are you authorized to work in the U.S.? NO What type of employment are you seeking?						P/T 🗌			
Have you ever worked for CESI? YES NO If so, when?									
Have you ever been arrested for a violent crime, fraud or embezzlement?									
Have you ever been convicted of a felony? YES \(\square\) NO \(\square\) If yes, explain									
Are you available t	to work nights?	YES	NO 🗌	Are yo	ou available	to work weekends?		YES	NO 🗌
EDUCATION									
High School				Address					
From	То	Did you gradu	uate? Y	ES 🗌	NO \square	Degree			
College				Address					
From	То	Did you gradu	uate? Y	ES 🗌	NO \square	Degree			
Other				Address					
From	То	Did you gradu	uate? Y	ES 🗌	NO 🗌	Degree			

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EMPLOYMENT HISTORY Please do not indicate "see resume" and explain gaps of employment in the comment section Company Phone () Address Supervisor Job Title Starting Salary \$ Ending Salary \$ Responsibilities То From Reason for Leaving May we contact this company for a reference? YES NO \square Company Phone) Address Supervisor Ending Salary \$ Job Title Starting Salary \$ Responsibilities From То Reason for Leaving YES NO 🗌 May we contact this company for a reference? Phone Company () Address Supervisor Job Title Starting Salary \$ Ending Salary \$ Responsibilities From То Reason for Leaving May we contact this company for a reference? YES NO \square Explain any gaps in employment:

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TRAINING

CONSUMER EDUCATION SERVICES, INC. 3700 Barrett Drive Raleigh, NC 27609 919.785.0725 www.cesisolutions.org

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REFERENCES
List three professional references that are not related to you. If not applicable, list three school or personal references that are not related to you.
Full Name Relationship
Company Phone ()
Address
Full Name Relationship
Company Phone ()
Address
Full Name Relationship
Company Phone ()
Address
MILITARY SERVICE
Branch From To
Rank at Discharge Type of Discharge
If other than honorable, explain

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DISCLAIMER AND SIGNATURE

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired. I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information. In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me. I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself. I understand that if I resign from my employment with CESI during classroom training or during the On the Job Training (OJT) that I will be required to repay CESI the cost incurred for my training. Such repayment will be deducted from my final paycheck. Furthermore, I understand that the position I am applying for is at the mutual consent of CESI and the employee, and either party may terminate that relationship at any time, with or without cause, and with or without advance notice. Employment with CESI is at will and NC is an at-will state.

Signature	Date



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EQUAL EMPLOYMENT OPPORTUNITY FORM

APPLICANT INFORMATION									
Full Name:									
r un r u	Last				F	irst	M.I.		
Address:									
Street Address			dress					Apartment/Unit #	
	-	City					State	ZIP Code	
Home Phone: ()					Social Security Num	Social Security Number:			
Positio	n Applied	d for:							
VOLUI		INFORMAT		seted i	a accordance with fodoral regulation	a Thai	information is valuntary and w	ill not ho	
					n accordance with federal regulation by ment with our company.	is. The	illomation is voluntary and w	ill flot be	
Racial or Ethnic Group									
Racio	ai Oi Eu	illic Group							
	Americ	an Indian/A	llaskan		Asian/Pacific Islander		Black/African American		
	☐ Hispanic/Latino			White/Caucasian		Other			
	_								
Gend	ler								
	Male				Female				
Military Service									
Milli	ary Ser	vice							
	Vietna	m Era Veter	an		Other Veteran				
	Disable	ed Veteran			Not Applicable				

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