

COYOTE POINT MUSEUM EMPLOYMENT APPLICATION

POSITION APPLIED FOR: _____

PERSONAL INFORMATION

NAME: _____ SOCIAL SECURITY NUMBER: _____
Last First MI

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ BUSINESS PHONE: _____

DRIVER'S LICENSE: _____
(If job announcement indicates this requirement): STATE NUMBER EXPIRATION

Are you at least 18 years old? YES _____ NO _____
(Applicants under 18 must supply proof of age)

If you've previously applied at CPM, please indicate the position: _____

Are you legally eligible for employment? (Proof will be required if hired) YES _____ NO _____

Are you willing to accept: FT _____ PT _____ Seasonal/Temporary _____
(Check all that apply)

Please indicate any days or hours you are **unavailable** to work: _____

Are you willing to work overtime if necessary? YES _____ NO _____

Please list any relatives who currently work for CPM: _____

Are there any essential functions of this job you are unable to perform or require special accomodation to perform? (please list) _____

Have you ever been convicted of a criminal offense? YES _____ NO _____
(If YES, please attach an explanation. Conviction itself is not grounds for denial -- the time, nature and circumstances will be evaluated)

EDUCATION

Are you a High School graduate or have you passed the GED or CA Equivalency Exam? YES _____ NO _____

School	Name	City/State	Major	Degree	Date Rec'd
High School	_____	_____	XXXXX	XXXXX	XXXXX
College	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____

List any languages other than English in which you are proficient: _____ (Circle below)
 _____ Speak Read Write

Please list any other training, classes, experience or skills which you feel would be assets in this position: _____

Please list any licenses, memberships or certifications you possess:
 Issuing agency: _____ Number: _____ Expiration: _____

DO NOT WRITE IN THE SPACE BELOW

DATE RCVD.:

ACCEPT REJECT
 REASON: _____

COYOTE POINT MUSEUM EMPLOYMENT APPLICATION

EMPLOYMENT HISTORY

List below all present and past employers for at least the past 10 years. Xerox this page and attach additional sheets if necessary. Do NOT refer to a resume or leave sections blank. Begin with your most recent or current employer. INCLUDE volunteer experience.

JOB TITLE: _____ SUPERVISOR'S NAME/PHONE: _____
EMPLOYER: _____
ADDRESS: _____
FROM: _____ DUTIES: _____
TO: _____
SALARY: _____
HOURS/WEEK: _____ REASON FOR LEAVING: _____

JOB TITLE: _____ SUPERVISOR'S NAME/PHONE: _____
EMPLOYER: _____
ADDRESS: _____
FROM: _____ DUTIES: _____
TO: _____
SALARY: _____
HOURS/WEEK: _____ REASON FOR LEAVING: _____

JOB TITLE: _____ SUPERVISOR'S NAME/PHONE: _____
EMPLOYER: _____
ADDRESS: _____
FROM: _____ DUTIES: _____
TO: _____
SALARY: _____
HOURS/WEEK: _____ REASON FOR LEAVING: _____

JOB TITLE: _____ SUPERVISOR'S NAME/PHONE: _____
EMPLOYER: _____
ADDRESS: _____
FROM: _____ DUTIES: _____
TO: _____
SALARY: _____
HOURS/WEEK: _____ REASON FOR LEAVING: _____

REFERENCES: (Please list three persons not related to you who are familiar with your work)

NAME: _____ OCCUPATION: _____ PHONE: _____
NAME: _____ OCCUPATION: _____ PHONE: _____
NAME: _____ OCCUPATION: _____ PHONE: _____

CERTIFICATION: By my signature below I certify that I meet all the requirements stated in the job announcement; that all statements made in this application are true and complete and that I understand and agree that misstatements or omissions of material facts therein may forfeit my rights to employment with the Museum. I authorize CPM to verify facts herein including contacting former employers.

SIGNATURE DATE