

Please print clearly



Central Brevard Sharing Center, Inc.

P.O. Box 3363

Cocoa, Florida 32924-3363

Phone: (321) 631-0306

APPLICATION FOR EMPLOYMENT

**Please Answer All Questions. Resumes Are Not a Substitute for a Completed Application.**

Applicants will be considered without discrimination because of race, color, sex, age, religion, national origin, disability, veteran's status or any other basis prohibited by federal, state or local law. PBS also provides reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act (ADA) and applicable state and local laws.

Position Applied for: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number ( ) \_\_\_\_\_

Present Address (Street, Apt. or Unit Number): \_\_\_\_\_

City | State | Zip: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Are you able at the time of employment, to submit verification of your legal right to work in the U.S.? (Verification and completion of Form I-9 must be submitted no later than three business days after date of hire.) Yes No

If you are a minor, can you produce the work certificate necessary to obtain employment? Yes No

Are you seeking Full or Part-time work? \_\_\_\_\_ What Shift? \_\_\_\_\_

When are you available to begin work? \_\_\_\_\_

Have you ever been convicted of a felony? Note: This question does not apply to convictions which have been expunged, sealed, pardoned or otherwise exonerated or eradicated (A conviction record will not necessarily be a bar to employment.) Yes No

If yes, please describe fully the criminal conviction(s), listing the nature of the offense(s) and your rehabilitation since the conviction(s).

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List your computer, foreign language skills and work experience which you feel qualifies you 'for the job for which you are applying: \_\_\_\_\_

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If a license is required for the position for which you are applying (drivers or other), please list the following: License Number: \_\_\_\_\_ State of Issuance: \_\_\_\_\_

License Type: \_\_\_\_\_

Education	School Name and Location	Course of Study	Graduate?	# of Years	Degree/Diploma
High School					
College					
Bus/Tech/Trade or Post College					

### WORK EXPERIENCE

Please list below your last three (3) employers beginning with the most recent.

Name & Address of Company: (Describe business type)

\_\_\_\_\_

Name Address Type of Business

Phone: ( ) \_\_\_\_\_ Date Employed: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_

Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Compensation: Start \$ \_\_\_\_\_ Last \$ \_\_\_\_\_ Reason Left: \_\_\_\_\_

Duties: \_\_\_\_\_

Name & Address of Company: (Describe business type)

\_\_\_\_\_

Name Address Type of Business

Phone: ( ) \_\_\_\_\_ Date Employed: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_

Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Compensation: Start \$ \_\_\_\_\_ Last \$ \_\_\_\_\_ Reason Left: \_\_\_\_\_

Duties: \_\_\_\_\_

Name & Address of Company: (Describe business type)

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Name Address Type of Business

Phone: ( ) \_\_\_\_\_ Date Employed: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_

Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Compensation: Start \$ \_\_\_\_\_ Last \$ \_\_\_\_\_ Reason Left: \_\_\_\_\_

Duties: \_\_\_\_\_