



**Community Services Center**  
 1100 Community Way  
 Portales, New Mexico 88130  
 1-888-272-7850  
 (575) 356-8576 or Fax (575) 356-8031  
 e-mail: csc@yucca.net

facebook.com/cscofportalesnm  
 twitter.com/cscofportales

**EMPLOYMENT APPLICATION**

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone # (\_\_\_\_) \_\_\_\_\_ Cellular/Other # (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Referral Source (How did you hear about us?) \_\_\_\_\_

Have you ever been employed here before? If yes, give dates and positions \_\_\_\_\_ Yes No

Are you legally eligible for employment in this country? ..... Yes No

Date available for work..... \_\_\_\_ / \_\_\_\_ / \_\_\_\_ What is your desired salary range?.....\$ \_\_\_\_\_

Type of employment desired  Full-Time  Part-time  Temporary

Driver's License number if driving may be required in position for which you are applying \_\_\_\_\_ State \_\_\_\_\_

Are you related to anyone that is currently employed at Community Services Center? Yes No If so, who?

**Employment History**

Starting with your most recent employer, provide the following information.

Employer \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
 Starting job title/final job title \_\_\_\_\_  
 Immediate supervisor and title (for most recent position held) \_\_\_\_\_ May we contact for reference?  Yes  No  Later  
 Why did you leave? \_\_\_\_\_  
 Summarize the type of work performed and job responsibilities. \_\_\_\_\_

Dates Employed:	Month / Year	to	Month / Year
Compensation (Starting)			
<input type="checkbox"/> Hourly	<input type="checkbox"/> Salary	\$	per
Compensation (Final)			
<input type="checkbox"/> Hourly	<input type="checkbox"/> Salary	\$	per

What did you like most about your position?

What were the things you liked least about the position?

Employer \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
 Starting job title/final job title \_\_\_\_\_  
 Immediate supervisor and title (for most recent position held) \_\_\_\_\_ May we contact for reference?  Yes  No  Later  
 Why did you leave? \_\_\_\_\_  
 Summarize the type of work performed and job responsibilities. \_\_\_\_\_

Dates Employed:	Month / Year	to	Month / Year
Compensation (Starting)			
<input type="checkbox"/> Hourly	<input type="checkbox"/> Salary	\$	per
Compensation (Final)			
<input type="checkbox"/> Hourly	<input type="checkbox"/> Salary	\$	per

What did you like most about your position?

What were the things you liked least about the position?

Employer \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
 Starting job title/final job title \_\_\_\_\_  
 Immediate supervisor and title (for most recent position held) \_\_\_\_\_ May we contact for reference?  Yes  No  Later  
 Why did you leave? \_\_\_\_\_  
 Summarize the type of work performed and job responsibilities. \_\_\_\_\_

Dates Employed:	Month / Year	to	Month / Year
Compensation (Starting)			
<input type="checkbox"/> Hourly	<input type="checkbox"/> Salary	\$	per
Compensation (Final)			
<input type="checkbox"/> Hourly	<input type="checkbox"/> Salary	\$	per

What did you like most about your position?

What were the things you liked least about the position?

## Skills and Qualifications

Summarize any special training, skills, licenses, and/or certificates that may assist you in performing the position for which you are applying.

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

- Word Processing \_\_\_\_\_ Years: \_\_\_\_\_
  Email \_\_\_\_\_ Years: \_\_\_\_\_  
 Spreadsheet \_\_\_\_\_ Years: \_\_\_\_\_
  Internet \_\_\_\_\_ Years: \_\_\_\_\_  
 Presentation \_\_\_\_\_ Years: \_\_\_\_\_
  Other \_\_\_\_\_ Years: \_\_\_\_\_

## Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> GED <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> GED <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> GED <input type="checkbox"/> Other _____		

## References

List name and telephone number of three business/work references.

Name	Title	Relationship to You	Telephone	Number of years known
			( )	
			( )	
			( )	

## Applicant Statement

I certify that all information provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume' or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering, and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United states and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (1) eliminate me from further consideration for employment, or (2) may result in my immediate discharge from the employer's service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

**I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_