|  |  |
| --- | --- |
| Flickinger Learning CenterEmployment Application |  |

|  |
| --- |
| Applicant Information |
| Last Name |  | First |  | M.I. | Date |  |
| Street Address |  | Apartment/Unit # |  |
| City |  | State |  | ZIP |  |
| Phone |  | E-mail Address |  |
| Date Available |  | Social Security No. |  | Desired Salary |  |
| Are you 18 years of age or older? | YES [ ]  | NO [ ]  | How did you hear about the position? |  |
| Are you a citizen of the United States? | YES [ ]  | NO [ ]  | If no, are you authorized to work in the U.S.? | YES [ ]  | NO [ ]  |
| Have you ever worked for this company? | YES [ ]  | NO [ ]  | If so, when? |  |
| Have you ever been convicted of a felony? | YES [ ]  | NO [ ]  | If yes, explain |  |
| Position Applying For:  |
| Education |
| High School |  | Address |  |
| From |  | To |  | Did you graduate? | YES [ ]  | NO [ ]  | Degree |  |
| College |  | Address |  |
| From |  | To |  | Did you graduate? | YES [ ]  | NO [ ]  | Degree |  |

|  |
| --- |
|  |
|  |
| Disclaimer and Signature |
| Flickinger Learning Center provides equal opportunities to all employees and applicants for employment without regard to race, color, religion, sex, origin, age, marital status, citizenship, disability, status or any other protected status. The policy governs all areas of employment at Flickinger Learning Center including recruiting, hiring, promotions, compensation, benefits, discipline and terminations. AGREED UPON CONDITIONS OF EMPLOYMENT I hereby authorize Flickinger Learning Center and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, adult criminal or police records, and motor vehicle records including records maintained by both public and private organizations for the purpose of confirming the information contained on my application. I understand that employment by Flickinger Learning Center is “at-will,” meaning that either I or Flickinger Learning Center can terminate employment relations at any time. I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. |
| Signature |  | Date |  |

**Application Process**

To submit your application: Please email your application, resume and references to careers@flickingerlearning.org