

*Asian American Cultural Center*

*Employment Application*

**PERSONAL INFORMATION**

NAME: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_  
First Name Middle Initial Last Name

ADDRESS: \_\_\_\_\_  
Street City State Zip

DATE OF BIRTH : \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ HOME PHONE: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ CELL. / PAGER: \_\_\_\_\_  
MM DD YY

**EMPLOYMENT DESIRED & AVAILABILITY**

POSITION DESIRED: \_\_\_\_\_ SALARY / WAGE DESIRED: \_\_\_\_\_ per hr./per yr.

TOTAL HOURS AVAILABLE PER WEEK: \_\_\_\_\_ Hours WILLING TO WORK WEEDENDS AND HOLIDAYS: Yes / No

WILLING TO WORK SHIFT- HOURS: Yes / No DATE AVAILABLE: \_\_\_\_\_

**EDUCATION**

HIGH SCHOOL: \_\_\_\_\_  
Name & Location Year Graduated

COLLEGE: \_\_\_\_\_  
Name & Location 1 2 3 4  
Circle Last Year Completed

\_\_\_\_\_  
Major Subject(s) Studied Year Graduated Degree Received

OTHER SUBJECTS OF SPECIAL STUDIES / RESEARCH, AND DIPLOMA / CERTIFICATE RECEIVED : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FORMER EMPLOYERS**

1. COMPANY: \_\_\_\_\_ PHONE: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DATES WORKED: From \_\_\_\_\_ To \_\_\_\_\_ LAST POSITION HELD: \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_  
SUPERVISOR'S NAME: \_\_\_\_\_ LAST SALARY / WAGE: \_\_\_\_\_
  
2. COMPANY: \_\_\_\_\_ PHONE: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DATES WORKED: From \_\_\_\_\_ To \_\_\_\_\_ LAST POSITION HELD: \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_  
SUPERVISOR'S NAME: \_\_\_\_\_ LAST SALARY / WAGE: \_\_\_\_\_
  
3. COMPANY: \_\_\_\_\_ PHONE: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DATES WORKED: From \_\_\_\_\_ To \_\_\_\_\_ LAST POSITION HELD: \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_  
SUPERVISOR'S NAME: \_\_\_\_\_ LAST SALARY / WAGE: \_\_\_\_\_

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**PERSONAL REFERENCES ( NOT RELATED )**

1. NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_
  
2. NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_
  
3. NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

**GENERAL**

1. ANY RELAVANT EXPERIENCE OR TRAINING OTHER THAN WORK EXPERIENCE?

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2. ACTIVITIES – CIVIC, ATHLETIC, FRATERNAL

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3. IN CASE OF EMERGENCY, PLEASE CONTACT:

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
ADDRESS: \_\_\_\_\_

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**APPLICANT'S DECLARATION**

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of fact(s) called for is cause for dismissal. I further understand and agree that my employment is at will, and is for no definite period. Termination of employment may become effective at any time without any prior notice and without any reason given.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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***FOR OFFICE USE ONLY***

Interviewed by: \_\_\_\_\_

Name

Date & Time

Signature

Recommendation

Recommendation Approved By: \_\_\_\_\_

Procedure follow-up by: \_\_\_\_\_