Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résumé, but all questions <u>must</u> be answered.

Project Pink'd, Inc.					Position applying for: Program Manager								
PERSONAL DATA													
Name (last, first, mide	dle)												
Street Address and/o		City				State	Zip						
Home Telephone Nu	Business Telephone Number				Cellular Telephone Number								
Date you can start w	Salary Desired				Do you have a High School Diploma or GED? Yes No								
POSITION INFOR	MATION	Check all that	you are willing to w	ork. T	he current	position	is part-ti	ime.					
Hours: Full Tir Part Tir	_	Days Evenin Weeks	•										
Are you authorized t	o work in th	ne U.S. on an unr	restricted basis?					l	Yes C	丁	No		
Have you ever been employment.) If yes,		l of a felony? (Co	onvictions will not ne	ecess	arily disqua	lify an a	pplican	t for	Yes [No		
Have you been told Yes \tag{\tag{N}}	the essenti	al functions of th	ne job or have you v	viewe	d a copy o	f the job	descrip	otion listin	g the esse	ntial	function	s of the job?	
Can you perform the	ese essentic	al functions of the	e job with or without	t reas	onable acc	commod	dation?		Yes		No		
QUALIFICATIONS as degrees, schools			n or training you fee				applied	for that v	would help	you	perform	the work, such	
		School N	Vame	Degree		Address/City/State							
School													
School													
Other													
SPECIAL SKILLS Li organizations/teams	ist any spec , etc.) Why	cial skills or expe are you interest	rience that you feel ed in a position with	l wou Proje	ld help you ct Pink'd, Ir	in the p	oosition ⁻	that you	are applyi	ng fo	or (leade	rship,	
REFERENCES Ple don't have three pro			eferences not relate list personal, unrelat			II name,	, addres	ss, phone	number, o	and r	relationsh	nip. If you	
Name			Address/City/State					Pl	Phone Relationship			ationship	
										$oldsymbol{ol}}}}}}}}}}}}}}$			
										$oldsymbol{\perp}$			

WORK HISTORY Start with your present or most recent po	aid and unpaid	d employment and work	back. Use separate sheet if necessary.
Job Title #1	Start Date (m	no/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's N	Name	Phone Number
City	State		Zip
Duties:			
Reason for Leaving		Starting Salary	Ending Salary
May we contact your present employer?	Yes 🗌	No N/A	
Job Title #2	Start Date (m	no/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's N	Name	Phone Number
City	State		Zip
Duties:	1		
Reason for Leaving		Starting Salary	Ending Salary
Job Title #3	Start Date (m	no/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's N	Name	Phone Number
City	State		Zip
Duties:	1		,
Reason for Leaving		Starting Salary	Ending Salary
Job Title #4	Start Date (m	no/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's N	Name	Phone Number
City	State		Zip
Duties:	1		
Reason for Leaving		Starting Salary	Ending Salary
I certify that the facts set forth in this Application nderstand that if I am employed, false statements, on a mployer to make an investigation of any of the facts sometimes may contact any listed references on this application of a constant and that the compart of the type of category employee) may resign at any ny employee at any time, with or without cause, with the compart of the constant and the constant a	nissions or mis set forth in thi olication. any is an "at v time, just as	srepresentations may s application and rel will" employer. There the employer may te	result in my dismissal. I authorize the ease the Employer from any liability. The efore, any employee (regular, temporary, erminate the employment relationship with

Date

Applicant Signature