

Greater Midland Community Centers, Inc.

2205 Jefferson Avenue, Midland, Michigan 48640

Application for Employment

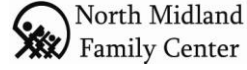
Greater Midland Community Centers, Inc. is an equal opportunity employer dedicated to a policy of non-discrimination in employment on any basis including race, color, age, gender, religion, national origin, disability, or other classes protected by applicable federal, state, or local law.

Please answer all questions. Type or print clearly using black ink. Attach a resume (if available). This application will remain active for three (3) months.

Please circle the corporate division(s) for which you seek employment:



MIDLAND
CURLING CENTER



Note: The term "Center" found within the rest of this application for employment refers collectively to the corporation and each of its five divisions.

Position(s) applied for:

Are you able to perform, with or without reasonable accommodations, the essential functions of the position for which you are applying? Yes No

PERSONAL INFORMATION

Give name as it appears/will appear on your Social Security card.

Name (Last, First, Middle):

U.S. Social Security number:

Drivers License / State:

Address (Street, City, State, ZIP, Country):

Telephone 1: ()

Telephone 2: ()

Email address:

Are you 18 years of age or older? Yes No

Are you legally authorized to work in the United States? Yes No (If yes, verification will be required)

Have you ever been convicted of a crime?* Yes No

Identify all misdemeanor and felony convictions.

Are any felony charges pending against you? Yes No

Please give dates, places, charges and disposition of all convictions, and any other information about convictions you would like the Center to consider. The Center will conduct a criminal history file check for new employees to determine the existence of any arrest resulting in conviction.

*A yes response does not automatically disqualify a job applicant from further consideration. Each application is evaluated individually, based on a number of factors including the nature of the crime, how long ago the crime and/or release from incarceration occurred, whether a sufficient or satisfactory work record has been established since the crime and/or release of incarceration, and the position applied for.

AVAILABILITY

Will you consider temporary employment? Yes No

Full-time Part-time Either Available to work: Days Evenings Nights Any

Days of the week are you able to work? Mon Tue Wed Thu Fri Sat Sun

If hired, on what date are you available to begin work?

Number of hours per week desired (1-40): _____ Minimum rate of pay willing to accept: \$ _____ /hr

Have you previously been employed by the Center? Yes No

Do you have relatives working at the Center? Yes No If yes, identify below.

Relative's name: _____ Relationship? _____ Department: _____

Relative's name: _____ Relationship? _____ Department: _____

EDUCATION

School	Years Completed	Name of School	Major Course of Study	Degree
		Location (City and State)		
High				
College				
College				
Bus/Tech				
Other				

Other course, seminars, specialized training or study relevant to the position you are applying for:

List any awards, scholarships, offices held or other activities that represent your qualifications:

SKILLS/LICENSES

Describe special skills, experiences, training and acquired licenses that you have not noted in other parts of this application but which you feel would help you in the position(s) you have applied for:

Tell why you feel that you would be the best candidate for this position:

EMPLOYMENT HISTORY

Identify all employers for the last 10 years. Begin with present of most recent.

Employer and department:		Telephone: ()	
Address (Street, City, State, ZIP, Country):			
Supervisor's name:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start date (MM/YY):	End date (MM/YY):	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
End title:		Final hourly rate of pay: \$	
Describe Duties:			

Employer and department:		Telephone: ()	
Address (Street, City, State, ZIP, Country):			
Supervisor's name:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start date (MM/YY):	End date (MM/YY):	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
End title:		Final hourly rate of pay: \$	
Describe Duties:			

Employer and department:		Telephone: ()	
Address (Street, City, State, ZIP, Country):			
Supervisor's name:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start date (MM/YY):	End date (MM/YY):	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
End title:		Final hourly rate of pay: \$	
Describe Duties:			

Employer and department:		Telephone: ()	
Address (Street, City, State, ZIP, Country):			
Supervisor's name:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start date (MM/YY):	End date (MM/YY):	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
End title:		Final hourly rate of pay: \$	
Describe Duties:			

PERSONAL REFERENCES

Provide the names of three persons not related to you who can provide a reference as to your qualifications for the position(s) you have applied for and/or your personal characteristics that may be relevant to this job (i.e. integrity, reliability, honesty, etc.)

Name	Address (City and State)	Occupation or Title	Telephone Number

CERTIFICATION

I hereby certify that the facts stated in the application for employment are true and correct. I understand that false statements, misrepresentations or omission of facts requested shall be grounds for denial of employment and, if employed, for immediate dismissal. I authorize the Greater Midland Community Centers, Inc., to investigate all statements and claims contained within this application and subsequent oral interviews, and I acknowledge and agree that the Greater Midland Community Centers, Inc. may check references from sources other than those personal references listed herein. I hereby release all current and former employers from any charges or damages for releasing any and all employment information, whether subjective or objective to the Greater Midland Community Centers, Inc.

I understand that if hired, I will be an employee at will and that both I and the Greater Midland Community Centers, Inc. will have the right to terminate my employment at any time, with or without advance notice and with or without cause. This policy is called "employment at will" and no one other than the Greater Midland Community Centers, Inc. Board officers (and only if in writing, signed by an officer and myself) has the authority to alter this agreement, to enter into any written agreement for employment for a specified period of time, or to make any written or oral agreement contrary to this policy.

Applicant Signature: _____ Date _____.