



APPLICATION FOR EMPLOYMENT

Audubon Society of Portland is committed to the equality of opportunity for all. Tolerance and camaraderie with one another is expected. The Audubon Society of Portland is an equal opportunity organization that does not discriminate on the basis of race, religion, color, sex, marital status, familial status, national origin, age, mental or physical disability, sexual orientation, gender identity, or source of income.

Please complete all portions of the application. We will not accept incomplete applications.

Position Applied For: _____ Date: _____

Name (in full): _____

Address (in full): _____

Phone Number: _____ Social Security Number: _____

Email address: _____

If hired you will be required to submit identification in accordance with Immigration and Naturalization requirements.

Please answer the following:

1. Have you ever filed an application with Audubon Society of Portland before?
 Yes No If yes, give date(s): _____
2. Have you ever been employed by Audubon Society of Portland before?
 Yes No If yes, give date(s): _____
3. On what date would you be available for work? _____
4. Are you available to work (check all that apply):
 Full-time? Part-time?
 Evenings? Temporary?
5. Are you currently on "lay off" status and subject to recall?
 Yes No If yes, explain: _____
6. Have you ever been convicted of a crime, including sexual or child abuse?
 Yes No If yes, provide details: _____
7. Are you 18 years of age or older? Yes No
8. Do you possess a valid driver's license? Yes No

(over)

	Name of School/Location	Number of Years	Degree/Diploma
High School			
Business/Trade School			
College/University			
Graduate/Professional			

PREVIOUS EMPLOYMENT AND REFERENCES. Give in chronological order, beginning with your most recent position. Include any job-related military service assignment and volunteer activities. (You may exclude organizations which would reveal race, color, sex, sexual preference, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status).

- 1 Name of Firm: _____
Address: _____
Telephone: _____
Name of Supervisor: _____ Dates of Employment: _____
Position(s) held: _____
Starting hourly rate or salary: _____ Ending hourly rate or salary: _____
Reason for leaving: _____

- 2 Name of Firm: _____
Address: _____
Telephone: _____
Name of Supervisor: _____ Dates of Employment: _____
Position(s) held: _____
Starting hourly rate or salary: _____ Ending hourly rate or salary: _____
Reason for leaving: _____

- 3 Name of Firm: _____
Address: _____
Telephone: _____
Name of Supervisor: _____ Dates of Employment: _____
Position(s) held: _____
Starting hourly rate or salary: _____ Ending hourly rate or salary: _____
Reason for leaving: _____

PREVIOUS EMPLOYMENT AND REFERENCES (Continued).

4 Name of Firm: _____
Address: _____
Telephone: _____
Name of Supervisor: _____ Dates of Employment: _____
Position(s) held: _____
Starting hourly rate or salary: _____ Ending hourly rate or salary: _____
Reason for leaving: _____

Summarize any special job-related skills and qualifications that you acquired from your employment or other experience: _____

List any memberships, business or civic activities, or offices held that you consider relevant to your ability to do this job. *(You may exclude memberships that would reveal race, color, sex, sexual preference, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status).*

Professional references. Please give names, addresses, and telephone numbers.

Name _____ Phone _____
Address _____

Name _____ Phone _____
Address _____

Personal references. Please give the names, addresses, and telephone numbers of two persons to whom you are not related.

Name _____ Phone _____
Address _____

Name _____ Phone _____
Address _____

