Application for Employment

Buckeye Community Services, P.O. Box 604, 220 Morton Street, Jackson, Ohio 45640 (740) 286-5039

Position(s) applied for	Date of Application				
Name					
Email Address	Social Securit	y No. ((last 4)		
Address/Street					
City/State/Zip	Phone Number (inc	lude are	a code)		
Have you filed an application with us before?	No	Yes	Date		
Have you ever been employed by us before?	No	Yes	Date		
Are you available to work: Full	time	P	art time		
Are you on lay-off from another employer and	subject to recall?		_ No	Yes	
Can you use an agency vehicle for agency busin Use of an agency vehicle requires three (3) years of l and a clean driving record as verified by the Bureau of	icensed driving experi	ence, a c	No current driver's	s license	
Can you use your personal vehicle for agency business req Use of your personal vehicle for agency business req Motor Vehicles and a minimum of \$100,000/300,000	uires an annual inspect	tion by tl	he State Burea	u of	
Are you willing to drive in congested metropolic Yes No	itan areas (Columb	us, Cle	veland, etc.) if necess	ary?
Do any of your friends or relatives work for B.	C.S. If yes, give na	ames:			
Do you have a High School Diploma or GED? If yes, please list school name and address					
Describe any post-high school education, degre	es earned, classes	taken, e	etc.		
Have you been convicted of a felony within the If yes, please explain:			Yes _	No	o —

Employer	Dates Employed	
Address		
Job Title		
Supervisor	Work Performed	
Reason for Leaving		
Employer	Dates Employed	
Address	Beginning Wage	
Job Title	Final Wage	
Supervisor	Work Performed	
Reason for Leaving		
Employer	Dates Employed	
Address	Beginning Wage	
Job Title	Final Wage	
Supervisor	Work Performed	
Reason for Leaving		
Qualified applicants are considered for all	vices is an equal opportunity employer. positions without regard to race, color, religion, creed, knull orientation, citizenship status, genetic information or	
knowledge. I authorize investigation of all necessary in arriving at an employment de or misleading information given in my app	Agreement application is true and complete to the best of my Il statements contained in this application as may be ecision. In the event of employment, I understand that false plication or interview(s) may result in discharge. I equired to abide by all regulations and policies of Buckeye	
Signature of Applicant	Date	