

## **CASA of Humboldt Application for Employment**

Thank you for your interest in working at CASA of Humboldt, an equal opportunity employer. Please complete this application as part of your application packet. Email this application, your resume, and cover letter stating why you are interested in this position to Jeanne Gordon, Executive Director at Jeanne@humboldtcasa.org.

Date:	Last Name:		First Na	First Name:		Middle Initial:	
Address:		City:	S	State: Z		Zip Code:	
Position Applying F	or:		How did y	ou hear about t	this job op	ening?	
					Yes	No	
·	years old (If under	s of transportation to 18, hire is subject to					
<b>Educational Backgro</b> High School	ound						
Name		Did you grad (Yes/No)	uate?	Number o		Degree or Diploma	
College/University							
Name		Did you grad (Yes/No)	uate?	Number o Complete		Degree or Diploma	



## **Employment History**

List below all present and past employment starting w	ith your mo	st recent employer.		
Name of Employer:		sition/Title:		
Dates of Employment:	Super	Supervisor's Name:		
Reason for Leaving:				
May we contact this employer for a reference?		☐ Yes	□ No	
Name of Employer:	Pos	sition/Title:		
Dates of Employment:	Super	visor's Name:		
Reason for Leaving:				
May we contact this employer for a reference?		☐ Yes	□ No	
Name of Employer:	Pos	sition/Title:		
Dates of Employment:	Super	visor's Name:		
Reason for Leaving:	I			
May we contact this employer for a reference?		☐ Yes	□ No	
Name of Employer:	Pos	sition/Title:		
Dates of Employment:	Super	visor's Name:		
Reason for Leaving:				
May we contact this employer for a reference?		☐ Yes	□ No	
Name of Employer:	Pos	sition/Title:		
Dates of Employment:	Super	visor's Name:		
Reason for Leaving:	[			
May we contact this employer for a reference?		☐ Yes	□No	



## References

List below four professional references (not related to you) who can speak to your work as a paid employee. At least one of these references must have served as a direct supervisor to you.

1.				
Name:		Relationship	:	Dates Worked Together:
				to
Phone Nui	mber:		Email:	
2.				
Name:		Relationship	:	Dates Worked Together:
				-
			T	to
Phone Nui	mber:		Email:	
_			I.	
3. Name:		Dolotionshin		Dates Worked Together:
ivame:		Relationship	•	Dates Worked Together.
				to
Phone Nui	mber:		Email:	
4.			-	
Name:		Relationship	:	Dates Worked Together:
			1	to
Phone Nui	mber:		Email:	
			•	
Please Read	d Carefully, Initial Each Pa	aragraph and Sign Belo	W	
	I hereby certify that I hav	e not knowingly withhe	ld any informa	tion that might adversely affect my chances
				correct to the best of my knowledge. I
	that any omission or misstatement of material fact on this application or on any document to secure			
			s application o	r for immediate discharge if I am employed,
	regardless of the time ela	psed before discovery		



HUMBOLDT COUNTY

I	n	it	ia	ls

I hereby authorize CASA of Humboldt to thoroughly investigate my references, work records, education, and background in accordance with National CASA and program requirements. I further authorize the references I have listed to disclose to CASA of Humboldt any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby related CASA of Humboldt, my former employers, and all other person, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

## Initials

I understand that nothing contained in the application or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and CASA of Humboldt. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with our without prior notice, at the option of myself or CASA of Humboldt, and that no promises or representations contrary to the foregoing are binding on CASA of Humboldt unless made in writing and signed by me and CASA of Humboldt's designated representative.

	In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in
	the United States and to complete the required employment eligibility verification document form upon
Initials	hire.

Applicant's Signature	Date