

Dayton Society of Natural History
Boonshoft Museum of Discovery / SunWatch Indian Village & Archaeological Park

Application for Employment

SECTION I: PERSONAL INFORMATION

Full Name: _____ Date: _____

Address: _____ Phone #: _____

Position Applying For: _____ Salary Desired: _____

Availability: Full-Time ___ Part-Time ___ Days ___ Evenings ___ Weekends ___ Other _____

Date available to start: _____

Have you ever applied to the DSNH before? If yes, when? _____

Have you ever been employed by the DSNH before? If yes, when? _____

Other names previously used: _____

Are you over 18 years of age? Yes ___ No ___

Have you ever plead guilty to, or been convicted of a crime? Yes ___ No ___ If "yes," please explain:

A conviction will not automatically disqualify you from being considered as a candidate for employment.

If employment is offered, can you submit a birth certificate, social security card, certificate of U.S. citizenship, or verification of your legal right to work in the U.S.? Yes ___ No ___

If employment is offered, can you provide personal identification such as U.S. passport, a driver's license, or photographic identification card issued by the state? Yes ___ No ___

SECTION II: EDUCATIONAL BACKGROUND

Level	Name of Institution	Years Attended	Field of Study	Graduate/Degree?
High School				
College				
Trade School				
Other				

Are you planning to pursue further studies? If yes, explain: _____

List any additional training and skills you feel would be relevant to the position you're applying for: _____

Do you speak any other languages besides English? _____

Are you CPR or First Aid certified? _____

SECTION III: EMPLOYMENT EXPERIENCE

List current or most recent job first, include all summer/temporary jobs held, as well as any military service.

Current or most recent employer: _____

Address: _____ Position Held: _____

_____ Supervisor's Name: _____

Phone Number: _____ Employed From _____ to _____

Job Duties and Responsibilities: _____

Starting Salary: _____ Final Salary: _____ Reason for Leaving: _____

May we contact this employer? If not, please explain: _____

Company: _____

Address: _____ Position Held: _____

_____ Supervisor's Name: _____

Phone Number: _____ Employed From _____ to _____

Job Duties and Responsibilities: _____

Starting Salary: _____ Final Salary: _____ Reason for Leaving: _____

Company: _____

Address: _____ Position Held: _____

_____ Supervisor's Name: _____

Phone Number: _____ Employed From _____ to _____

Job Duties and Responsibilities: _____

Starting Salary: _____ Final Salary: _____ Reason for Leaving: _____

Company: _____

Address: _____ Position Held: _____

_____ Supervisor's Name: _____

Phone Number: _____ Employed From _____ to _____

Job Duties and Responsibilities: _____

Starting Salary: _____ Final Salary: _____ Reason for Leaving: _____

SECTION IV: REFERENCES

Give name, address, and phone numbers of personal references that are not related to you, or previous employers

Name: _____ Home Phone: _____
Address: _____ Office Phone: _____
City: _____ State: _____ Zip: _____
Years Acquainted: _____ Occupation: _____

Name: _____ Home Phone: _____
Address: _____ Office Phone: _____
City: _____ State: _____ Zip: _____
Years Acquainted: _____ Occupation: _____

Name: _____ Home Phone: _____
Address: _____ Office Phone: _____
City: _____ State: _____ Zip: _____
Years Acquainted: _____ Occupation: _____

AS AN APPLICANT YOU AGREE TO AND UNDERSTAND THE FOLLOWING

I hereby affirm that the information provided in this application (and accompanying resume, if any), is true and complete to the best of my knowledge. I also agree that falsified information, significant omissions, or misrepresentations may disqualify me and may be considered sufficient justification for dismissal if discovered at a later date.

I authorize a thorough employment background investigation and agree to cooperate in such investigations. I agree to release, from all liabilities or responsibilities, all persons, agencies, and corporations requesting or supplying such information. If employed, I release the DSNH from any liability for future references it may provide regarding my work history at the company.

I understand that if employed, my employment is for no definite period of time and that I may terminate my employment relationship with this Company at any time, for any reason, and that this Company has the same right. I also understand and agree that the DSNH may change the terms and conditions of my employment, with or without cause, and with or without notice at any time. I also understand that no Company representative other than the President & CEO, and then only in writing and signed by the President & CEO, has the authority to enter into any agreement for any specific period of time, or make any agreement contrary to the forgoing.

I understand that according to federal law all individuals must, as a condition of employment, produce certain documentation to verify their identity as a U.S. citizen, or their legal authorization to work in the U.S.A. As a result, I understand that employment would be contingent upon producing the required documentation within the time period required by law.

Signature of Applicant

Date