

EMPLOYMENT APPLICATION An Equal Opportunity Employer

If you believe you require an acco	mmodation during the	selection pro	ocess, please contact	us to make appropriate arrangements.			
Name	Date						
Address							
				ode			
Email address:							
Telephone(s) Home ()	c	ell ()	\	Nork ()			
Position Applied for							
How did you hear about this pos	ition? □ Advertiser	ment □ Wa	alk-In □ CVSC We	ebsite			
☐ Other (explain)				_			
If offered employment, when will	you be available to	begin?					
Will you be available to work dur	ing all open hours?.		□ Ye	s □ No			
Will you be available to work nig	hts, weekends and/o	or holidays?	' Ye	s □ No			
Have you been given a job desc	ription?		□ Ye	s □ No			
Do you understand the job requi Can you perform the essential fu accommodation?	inctions of this job w	ith or witho	ut reasonable				
To qualify for employment, applie otherwise specified. If offered en				s □ No			
After an offer of employment, ca work in the United States?				s □ No			
List other names, if any, you have	e used						
EDUCATION RECORD							
Did you graduate from high scho	ool or receive a GED	certificate?	P □ Ye	s □ No			
School Name	Location		Diploma, Degree, or Certificate	r Major Field of Study			
Business/Technical/Vocational 1.							
2							
College/University							
1.							



LICENSES (Optional, unless required for the position for which you are now applying.)

state license numbers, and e		ions required to	r the position for which y	ou are applying. Indicate types,
Answer only if position require	es.			
Do you possess a valid drive	's license?	□ Yes □ N	No	
If so, license expires	Class_		Restrictions (if any)	
In addition to English, list any	other language a	abilities you pos	sess.	
Verbal fluency in				
Muitton fluores in				
List any special skills you pos	sess and/or equi	pment or office	machines you can oper	ate.
OTHER INFORMATION				
Have you ever been discipline	ed in your employ	yment?		☐ Yes ☐ No
If yes, please explain.				
Do you presently use illegal of	□ Yes □ No			
Have you ever been employe	🗆 Yes 🗆 No			
If yes, please provide the follow	wing information	1:		
Department		Position Title	e	
Dates of Employment	Re	eason for Separa	ation	
Are you related to anyone wh	□ Yes □ No			
If yes, please provide the follo	wing information	:		
Related person's name		Dep	partment	
Relationship				



EMPLOYMENT HISTORY

Provide information regarding all paid employment (include military employment if duties/assignments relate to the job you are applying for). Volunteer work which may be related to the position for which you are applying should also be provided. Describe your most recent position first; then list other positions in order held. Use a separate block for each position, even if with the same employer. Use additional sheets if necessary. Do **NOT** use references such as "See Résumé" in place of completing this section.

May we contact all emplo	yers listed?	(Attach a list of any exceptions with an explanation.)	□ Yes □ No			
Present Employer		Present Position				
Address		From (Mo/Yr)	To (Mo/Yr)			
City		☐ Full-Time (40 hrs/wk)	☐ Part-Time (<20 hrs/wk)			
State	Zip Code					
Supervisor's Name/Title Related Duties:		Telephor	Telephone ()			
Reason for Leaving:						
Employer		Position				
Address		From (Mo/Yr)	To (Mo/Yr)			
City		☐ Full-Time (40 hrs/wk)	☐ Part-Time (<20 hrs/wk)			
State	Zip Code					
Supervisor's Name/Title Related Duties:		Telephor	Telephone ()			
Reason for Leaving:						
Employer		Position				
Address		From (Mo/Yr)	To (Mo/Yr)			
City		☐ Full-Time (40 hrs/wk)	☐ Part-Time (<20 hrs/wk)			
State	Zip Code					
Supervisor's Name/Title Related Duties:		Telephor	Telephone ()			
Reason for Leaving:						
	complishm	ation that would be helpful in determining your qualifica ents, previous career highlights, or any other relevant i ation.				



ACKNOWLEDGMENTS

Please READ ALL of the following statements and INITIAL EACH of the lines to indicate you have read and understand each of the statements. If you have any questions, contact Sharon Thompson, (Human Resources Department). This application is the property of CVSC and will become part of my personnel file if I am hired. I authorize CVSC to contact any employer or individual to obtain from them any relevant information regarding my previous employment, military service, criminal history, characteristics or traits necessary for job performance, or other relevant qualifications for employment and/or continued employment with CVSC. In addition, I authorize CVSC to conduct a background search which includes criminal history and military history. In addition, if the position for which I am applying requires driving a vehicle, I authorize CVSC to conduct a Department of Motor Vehicles (DMV) search. If the position for which I am applying involves contact with minors or with any persons having diminished capacity to care for themselves, a search of government sex offender registries may be conducted. I further authorize CVSC to contact any institution and/or licensing authority to verify my possession of education, licenses, and/or certificates which may qualify me for employment. In exchange for CVSC consideration of my employment application, and/or any continued employment with CVSC, I authorize anyone possessing information to furnish it to CVSC upon request, and I release the organizations and all individuals providing the information or acquiring the information, including CVSC, from all claims, liability, and damages whatsoever claimed to be related to furnishing, obtaining, or using said information. This release applies to, but is not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations. I further understand this consent will apply during the entire course of my employment with CVSC should I obtain such employment. I understand and agree this consent shall remain in affect indefinitely. I hereby certify that all statements made in this application are true. I understand that any false statement of material facts herein may cause forfeiture on my part of all rights to any employment with CVSC. I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer, or if I have been hired, in my dismissal from employment regardless of length of employment. I understand that neither this document nor any offer of employment from CVSC constitutes an employment contract unless a specific contract document to that effect is executed. I agree to undergo any job-related drug screening and physical examination upon conditional offer of employment. I understand that CVSC is not requesting genetic information from the drug screening or the physical examination and that the person administering the examination should not provide genetic information to CVSC. I further understand and agree that this paragraph applies to any information supplied by me at a later date as part of this application. Per NRS 281.060 (2), I opt to exercise my rights by voluntarily attaching a copy of my DD214. NRS 281.060(2) states preference must be given, if qualifications of applicants are equal: a) first, to an honorably discharged military personnel of the United States who is a citizen of Nevada; and b) second, to other citizens of Nevada. Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge. Signature of Applicant Date