



**Employment Application**

*Delaware Children's Museum is an equal opportunity employer which strives to employ qualified individuals based upon job related qualifications regardless of race, religion, color, sex, national origin, age, disability or any other classification prescribed under applicable law.*

**Date of Application**

\_\_\_\_\_

**PERSONAL INFORMATION**

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone Number: \_\_\_\_\_ Social Security Number \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Referred By (Individual Name, Newspaper, Etc.): \_\_\_\_\_

If offered employment, can you submit verification of your legal right to work in the United States?  Yes  No

Are your school/employment records listed under another name?  Yes  No If yes, list here: \_\_\_\_\_

Have you been convicted of a felony within the last seven (7) years?  Yes  No If yes, please describe briefly including court, date and charges: \_\_\_\_\_

Do you currently reside with or are you related to any Delaware Children's Museum employee?  Yes  No If yes, please list the name of the employee \_\_\_\_\_

**EMPLOYMENT DESIRED**

Position applying for: \_\_\_\_\_ When are you available to start work \_\_\_\_\_

Please state any salary requirements \_\_\_\_\_ Shifts/Hours you are available to work \_\_\_\_\_

Have you previously applied at DCM?  Yes  No

May we contact your present employer now?  Yes  No

**EMPLOYMENT RECORD (LIST MOST RECENT JOB FIRST)**

|                                    |   |                                      |
|------------------------------------|---|--------------------------------------|
| COMPANY NAME/TYPE OF BUSINESS      | DATES (MO.,YR.)<br>OF EMPLOYMENT<br>FROM TO | LIST JOB TITLE(S) AND EXPLAIN DUTIES |
| COMPANY ADDRESS (CITY, STATE, ZIP) |   |                                      |
| IMMEDIATE SUPERVISOR PHONE         | SALARY<br>STARTING ENDING                   |                                      |
| REASON FOR LEAVING                 |   |                                      |
| COMPANY NAME/TYPE OF BUSINESS      | DATES (MO.,YR.)<br>OF EMPLOYMENT<br>FROM TO | LIST JOB TITLE(S) AND EXPLAIN DUTIES |
| COMPANY ADDRESS (CITY, STATE, ZIP) |   |                                      |
| IMMEDIATE SUPERVISOR PHONE         | SALARY<br>STARTING ENDING                   |                                      |
| REASON FOR LEAVING                 |   |                                      |

**EDUCATION**

| TYPE                         | SCHOOL NAME | LOCATION | MAJOR/<br>CONCENTRATION | GRADUATED? | TYPE OF<br>DEGREE | CIRCLE LAST YEAR<br>COMPLETED |
|------------------------------|-------------|----------|-------------------------|------------|-------------------|-------------------------------|
| HIGH SCHOOL<br>LAST ATTENDED |             |          |                         |            |                   | 1 2 3 4                       |
| COLLEGE OR<br>UNIVERSITY     |             |          |                         |            |                   | 1 2 3 4                       |
| GRADUATE OR<br>PROFESSIONAL  |             |          |                         |            |                   | 1 2 3 4                       |

**OTHER RECENT RELATED TRAINING**

| SUBJECT | DATES | LOCATION |
|---------|-------|----------|
|         |       |          |
|         |       |          |
|         |       |          |

I certify that I have answered each of the questions on this Application for Employment honestly and without reservation. I authorize the Delaware Children's Museum to contact any of my previous employers, except as noted, as well as any other reference source in order to verify the facts and information that I have furnished regarding my qualifications and character. I hereby release any such employer or person from any and all liability.

I understand that any misleading or incorrect statements that I may have made render this application void, and if employed, may be the cause for my termination.

I understand that, if employed, my employment will be at will and that I will not have a contract for employment nor a guarantee of employment.

Delaware Children's Museum is an Equal Opportunity Employer, and shall treat all employees and all applicants for employment equally and fairly based upon job related qualifications in accordance with all applicable local, state and federal laws.

APPLICANT'S SIGNATURE : \_\_\_\_\_

DATE: \_\_\_\_\_