

EMPLOYMENT APPLICATION



The Zimmer Children’s Museum is a non-profit 501(c)3 organization dedicated to helping young people discover their full potential and develop their capacity for creating positive change through interactive learning, creative self-expression and leadership development. At the Zimmer, individuals from diverse backgrounds learn how to create a world that promotes kindness, justice and social responsibility.

Today's Date _____

Last Name _____ First Name _____ Middle Initial _____

Street Address _____

City _____ State _____ ZIP _____

Email _____ Telephone _____

Position Applied For _____

How did you hear of this opening? _____

When can you start? _____ Desired Wage \$ _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? Yes No
(You may be required to provide documentation)

Are you looking for full-time employment? Yes No
If NO, what days and hours are you available? _____

Have you ever been released or asked to resign from a position? Yes No
If YES, please explain. _____

Have you ever been convicted of a crime, other than minor traffic violations? Yes No
(This will not necessarily affect your application. Do not include marijuana related convictions that are more than 2 years old)
If yes, please explain. _____

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EDUCATION

School Name and Location

Major/Degree

High School _____

College _____

Graduate _____

Other Training _____

Other Training _____

Are there other skills, qualifications or experience that we should consider?

EMPLOYMENT HISTORY

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____ Telephone _____

Email _____ May we contact? Yes No

Responsibilities _____

Reason for leaving _____

EMPLOYMENT APPLICATION

EMPLOYMENT HISTORY (cont.)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____ Telephone _____

Email _____ May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____ Telephone _____

Email _____ May we contact? Yes No

Responsibilities _____

Reason for leaving _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. Zimmer Children’s Museum is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at Zimmer Children’s Museum is “at will”, which means that either I or Zimmer Children’s Museum can terminate the employment relationship at any time, with or without prior notice, and for that reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager or executive of this company, without a full vote of the Board of Directors, has any authority to alter the foregoing.

Signature _____ Date _____