



Cincinnati Association for the
Blind & Visually Impaired

2045 Gilbert Avenue, Cincinnati, OH 45202-1490

APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

PLEASE PRINT

Date of Application _____

Position(s) Applied For _____

Name _____
Last First Middle

Address _____
Number Street
City State Zip Code

Telephone (_____) _____
Area Code

Social Security Number _____ / _____ / _____

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AN EQUAL OPPORTUNITY EMPLOYER

Have you filed an application here before? Yes No
If yes, give date _____

Have you ever been employed here before? Yes No
If yes, give date _____

Are you employed now? Yes No

May we contact your present employer? Yes No

Are you legally eligible for employment in the USA? Yes No
(Proof of eligibility to work is required upon employment)

Have you been convicted of any criminal offense other than a misdemeanor? Yes No

When could you be available for work? _____

EDUCATION

	Elementary School	High School	College/ University	Graduate/ Professional
School Name				
Years Completed (circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/ Degree				

EMPLOYMENT EXPERIENCE

List below your last three employers, starting with the last one first.

1. Employer: _____
Address: _____
Job Title: _____
Supervisor: _____
Dates Employed: From: _____ To: _____
Work Performed: _____
Reason for leaving: _____
Starting Hourly Rate / Salary: _____
Final Hourly Rate / Salary: _____
May we contact for reference? Yes No

2. Employer: _____
Address: _____
Job Title: _____
Supervisor: _____
Dates Employed: From: _____ To: _____
Work Performed: _____
Reason for leaving: _____
Starting Hourly Rate / Salary: _____
Final Hourly Rate / Salary: _____
May we contact for reference? Yes No

3. Employer: _____
Address: _____
Job Title: _____
Supervisor: _____
Dates Employed: From: _____ To: _____
Work Performed: _____
Reason for leaving: _____
Starting Hourly Rate / Salary: _____
Final Hourly Rate / Salary: _____
May we contact for reference? Yes No

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