Last Name

First Name

BROWARD CENTER

201 SW Fifth Avenue • Fort Lauderdale, Florida 33312 USA • Phone: 954.522.5334 • Fax: 954.468.3286 • www.browardcenter.org

APPLICATION FOR EMPLOYMENT

"An Equal Opportunity Employer"



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POSITION APPLYING FOR:			
How did you hear about position?			
Last Name First Name Middle	Date		
Street Address	Home Telephone ()		
City, State, Zip	Business Telephone		
Have you ever applied for employment with us? yes no If yes: Month and Year	Email Address:		
Are you legally eligible for employment in the United States?	Pay Expected \$		
Are you 18 years of age or older?yesno			

School	Name and Location of School	Course of Study	No. of years	Did you	Degree or
			Completed	Graduate?	Diploma
High School					
Business/Trade/ Technical					
College					
Graduate					

List any relevant volunteer work and all periods of un	employment during	g the past 10	years.		
Description of Activities or Volunteer Work	From			То	
	Month	Year	Month	Year	
	Month	Year	Month	Year	
	Month	Year	Month	Year	
	Month	Year	Month	Year	

List membership(s) in professional, job-related organizations, certificates:

List Awards, commendations, or other recognition received for outstanding achievement in school, military service, your work, or civic duties:

Center Authority?	e or is any member of your household employed by the Performing Arts
No Yes	
If yes, please give the Person's Nam	
Employing Department:	
Since your 18th birthday, have you b	been CONVICTED of ANY violation of the law, other than minor traffic
	been CONVICTED of ANY violation of the law, other than minor traffic NDERE/NO CONTEST to criminal charges, even if adjudication was
offenses, or pleaded NOLO CONTE withheld?	NDERE/NO CONTEST to criminal charges, even if adjudication was
offenses, or pleaded NOLO CONTE withheld? No Yes	NDERE/NO CONTEST to criminal charges, even if adjudication wasIf yes, please give:
offenses, or pleaded NOLO CONTE withheld? No Yes Nature of Offense:	NDERE/NO CONTEST to criminal charges, even if adjudication was

Note: A conviction does not automatically mean you cannot be employed by the PACA. The nature of the offense, how long ago it occurred, relationship to this job, etc. are given consideration.

Date:

Have you ever been involuntarily terminated	d from any position(s) of employment, or asked to resign from
any position(s) of employment? No	Yes

If your answer to the above question was yes, please identify each employer(s), explain the circumstances, and provide the specific reason(s) given by the employer for the termination or request for your resignation.

Employment

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

Company Name		Telephone
		()
Address		Employed (State month and year)
		From To
Name of Supervisor		Weekly Pay
·		Start Last
Job Title and Describe Your Work		Reason for Leaving
Company Name		Telephone
Address		Employed (State month and year)
Name of Supervisor		From To Weekly Pay
		Start Last
Job Title and Describe Your Work		Reason for Leaving
Company Name		Telephone
Address		Employed (State month and year) From To
Name of Supervisor		Weekly Pay Start Last
Job Title and Describe Your Work		Reason for Leaving
		· · · · · · · · · · · · · · · · · · ·
REFERENCES: List three persor	nal references who are not	relatives or former employers.
Name and Occupation	Address	Telephone No. Years Known

Name and Occupation	Address	Telephone No.	Years Known

APPLICATION MUST BE SIGNED

APPLICANT: PLEASE READ THIS STATEMENT CAREFULLY BEFORE SIGNING BELOW. UNSIGNED APPLICATION WILL BE VOIDED. I hereby certify that each response on this application and all other information I have furnished in applying for employment with the Performing Arts Center Authority is true and correct. I understand that any incorrect, incomplete, or false statement or information I have furnished may subject me to discharge at any time. The Performing Arts Center Authority believes that the information solicited from the applicant is in full compliance with all Federal and State equal employment laws.

Signature of applicant _