



# MADISON CREATIVE ARTS ACADEMY, INC.

## EMPLOYEE APPLICATION

### POSITION INFORMATION

List the position for which you are applying?

How did you hear of this position?

What are your salary requirements?

### PERSONAL INFORMATION

First Name:	Last Name:	Middle Initial:
E-Mail Address:	Home #:	Cell #:
Street:	City:	State: Zip:
Agency Name(s):		

### INFORMATIONAL

Do you have any relatives employed by Madison Creative Arts Academy, Inc. If so, list their names:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a veteran of the U.S Military? If yes, list dates of active duty and discharge. Date From: _____ Date To: _____ Discharge Date: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you receive a dishonorable discharge from the military? Answering "yes" will not necessarily bar you from employment. Each case will be judged on its own merit with respect to time, circumstances or seriousness of event.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you claiming veterans' preference under Florida Law?  If yes, include the Veterans Preference Claim Form included in this application.	<input type="checkbox"/> Yes <input type="checkbox"/> No

### CRIMINAL CONVICTION INFORMATION

Have you ever been convicted of a felony or crime that constitutes a felony under the law of	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Florida, entered a plea of Nolo Contendere (no contest) to a felony or crime that constitutes a felony under the law of Florida, or received a suspended sentence (regardless of the ultimate adjudication) for a felony or crime that constitutes a felony under the law of Florida. If yes, please explain:	
Have you ever been sued for causing death or injury to a person or for causing any property damage (e.g. for assault, batter, defamations, etc.)? If yes, Date: Please explain the nature of the claims in the lawsuit(s) and/or deposition(s).	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been censured/disciplined or found to be in violation of ethical standards by a professional organization? If yes Please explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Answering "yes" to any of the above questions will not necessarily bar you from employment. Each case will be judged on its own merit with respect to time, circumstances, seriousness and type of position.	

## EDUCATION

**Be prepared to provide original transcripts for all post-high school coursework. Check the highest level of attainment:**

High School:  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup>  GED

College:  1  2  3  4

Graduate School:  Yes  No

Name and location of education institution (secondary and beyond)	Semester or Quarter Hours Completed	Did you graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Major	Minor	Degree Award
Name and location of education institution (secondary and beyond)		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Name and location of education institution (secondary and beyond)		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Name and location of education institution (secondary and beyond)		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Name and location of education institution (secondary and beyond)		<input type="checkbox"/> Yes <input type="checkbox"/> No			

## EMPLOYMENT HISTORY

List all employment starting with your current or most recent job. Account for all periods including unemployment, U.S. military service and volunteer work. If you list military service as work experience, you must attach a copy of your DD-214.

### EMPLOYMENT HISTORY #1

<b>Employer Name:</b>	<b>Job Title:</b>	<b>Supervisors Name:</b>	<b>Hours worked:</b>
<b>Starting Salary:</b>	<b>Ending Salary:</b>	<b>Part Time:</b> <input type="checkbox"/>	<b>Full Time:</b> <input type="checkbox"/>

### EMPLOYMENT HISTORY #2

<b>Employer Name:</b>	<b>Job Title:</b>	<b>Supervisors Name:</b>	<b>Hours worked:</b>
<b>Starting Salary:</b>	<b>Ending Salary:</b>	<b>Part Time:</b> <input type="checkbox"/>	<b>Full Time:</b> <input type="checkbox"/>

### EMPLOYMENT HISTORY #3

<b>Employer Name:</b>	<b>Job Title:</b>	<b>Supervisors Name:</b>	<b>Hours worked:</b>
<b>Starting Salary:</b>	<b>Ending Salary:</b>	<b>Part Time:</b> <input type="checkbox"/>	<b>Full Time:</b> <input type="checkbox"/>

## SKILLS, LICENSES, CERTIFICATIONS, SCHOLARSHIPS, AWARDS, HONORS, & MEMBERSHIPS

Indicate any professional or occupational licenses, registrations or certification you currently hold. If a license or certification is required for a position, you must provide a copy of it to be the hiring department. Also list any special knowledge, skills or abilities you have.

List scholarships, awards, honors, and memberships in honorary and/or professional societies, publications, consulting work in professional field, etc.

# Certification, Authorization and Signature

I hereby consent to the release of any information maintained about me by all previous employers, educational institutions, law enforcement authorities, licensing boards or any other entity, agency, or individual which the School may contact to secure references or records. I hereby authorize Madison Creative Arts Academy, Inc. to release information concerning my employment to any prospective employer or others seeing to verify my employment with Madison Creative Arts Academy, Inc.. I hereby release Madison Creative Arts Academy, Inc. from all liability for any truthful statement made by an employee, agent or official of Madison Creative Arts Academy, Inc. , authorized by Human Resources, which is made to any prospective employer and waive any claim that might arise from any such statement. I certify that the information and answers I entered on this Application are true and complete to the best of my knowledge. I further understand that any false statements or omissions made on this application or supplement may be grounds for immediate discharge or removal from consideration of employment. Finally, acknowledge and agree to, as a post offer requirement, to be fingerprinted and have a background check if it is required for the position for which I am seeking.

Signature:

Date:

**MADISON CREATIVE ARTS ACADEMY, INC**

**2812 W US 90**

**Madison, Florida 32340**

**Phone: (850) 973-2529 Fax: (850) 973-8974**

Employment Application Form