

# HISPANIC UNITY OF FLORIDA INC

## APPLICATION FOR EMPLOYMENT

***Please Answer All Questions. Résumés Are Not A Substitute For A Completed Application.***

Hispanic Unity of Florida (HUF) is an equal opportunity employer. Applicants are considered for positions without regard to race, color, religion, sex, national origin, age, disability, citizenship, veteran status, marital status, sexual orientation or any other protected characteristic.

Position Applied For \_\_\_\_\_ Name \_\_\_\_\_

Telephone number \_\_\_\_\_ Alternate/Cellular Number \_\_\_\_\_

Present Address \_\_\_\_\_  
Street, Apt. No./City/State/Zip

How long have you lived there \_\_\_\_\_ / \_\_\_\_\_  
Years Months

Previous Address \_\_\_\_\_  
Street, Apt. No./City/State /Zip

How long did you live there \_\_\_\_\_ / \_\_\_\_\_  
Years Months

Desired Salary/Hourly Rate \_\_\_\_\_

If under the age of 18, can you produce the necessary work certificate at the time of employment? Yes  No

Type of employment desired? Full-time  Part-time  (Specify Hours) \_\_\_\_\_

Are you willing to work overtime? Yes  No  Date on which you can start work if hired \_\_\_\_\_

Have you previously applied for employment with HUF? Yes  No

If yes, when and where did you apply? \_\_\_\_\_

Have you ever been employed by HUF? Yes  No  If Yes, provide dates of employment, location, and reason

for separation from employment \_\_\_\_\_

\_\_\_\_\_

Have you ever been terminated or asked to resign from any job? Yes  No

Has your employment ever been terminated by mutual agreement? Yes  No

Have you ever been given the choice to resign rather than be terminated? Yes  No

If you answer Yes to any of the above three questions, please explain the circumstances of each occasion.

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All applicants: Do not include any convictions that were sealed, eradicated, erased, annulled by a court, or expunged or convictions that resulted in referral to a diversion program.

Have you ever been convicted of any criminal offense other than the applicable exceptions listed above? Yes  No

If you answered Yes, please provide the date(s) and explain the circumstances so that an individualized assessment may be conducted.

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*Criminal convictions will not automatically disqualify an applicant for a particular job. HUF will consider the nature of the crime, its seriousness, whether the conviction(s) substantially relates to the position's functions and qualifications, the frequency of convictions, the applicant's age at the time of conviction, the time elapsed since the date of conviction or completion of jail sentence, the applicant's entire work and educational history, and employment references and recommendations.*

Have you ever initiated an act of violence in the workplace? Yes  No

If Yes, please provide the date(s) and explain so that individual circumstances can be considered. (A "Yes" answer will not necessarily disqualify you from employment) \_\_\_\_\_

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List all special technical skills that you feel qualify you for the job for which you are applying (i.e., computer

programming/language, software, equipment operation, special tool or machines, etc.) \_\_\_\_\_

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Education	School Name and Location	Course of Study	Graduate?	# of Years Completed	Degree/Major
High School					
College					
Bus./Tech/Trade or Post College					

Honors Received \_\_\_\_\_

Is any additional information relative to change of name, use of an assumed name, or nickname necessary to enable a check on your work and educational record?

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**WORK EXPERIENCE:** Please list the names of your present or previous employers in chronological order with present or last employer listed first. Account for **all** periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for future consideration from employment.

Employer

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*Name* \_\_\_\_\_ *Address* \_\_\_\_\_ *Type of Business* \_\_\_\_\_

Telephone \_\_\_\_\_ Dates Employed: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ May we contact? Yes  No  If No, why not? \_\_\_\_\_

Wages: Start \_\_\_\_\_ Final \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

What will this employer say was the reason your employment terminated? \_\_\_\_\_

How much notice did you give when resigning? If none, explain \_\_\_\_\_

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Employer

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*Name* \_\_\_\_\_ *Address* \_\_\_\_\_ *Type of Business* \_\_\_\_\_

Telephone \_\_\_\_\_ Dates Employed: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ May we contact? Yes  No  If No, why not? \_\_\_\_\_

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What will this employer say was the reason your employment terminated? \_\_\_\_\_

How much notice did you give when resigning? If none, explain \_\_\_\_\_

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Employer

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*Name* \_\_\_\_\_ *Address* \_\_\_\_\_ *Type of Business* \_\_\_\_\_

Telephone \_\_\_\_\_ Dates Employed: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ May we contact? Yes  No  If No, why not? \_\_\_\_\_

Wages: Start \_\_\_\_\_ Final \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

What will this employer say was the reason your employment terminated? \_\_\_\_\_

How much notice did you give when resigning? If none, explain \_\_\_\_\_

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Please explain fully all gaps in your employment history in excess of one month.

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## REFERENCES

Please list the names of work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE NUMBER	NUMBER OF YEARS KNOWN

## APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that HUF may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the organization has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the organization's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically-recognized tests designed to detect the presence of alcohol or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with HUF's policies and applicable federal, state, and local law.

If employed by HUF, I understand and agree that the organization, to the extent permitted by federal, state, and local law, may exercise its right without prior warning or notice, to conduct inspections of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, non-compete, and/or conflict of interest statement.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration from employment or, if employed, disciplinary action, up to and including immediate dismissal.

I understand that neither this application nor any communication by a management representative is intended to create or does create a contract of employment, offer, or promise of employment for a definite term. I acknowledge that if hired by HUF, employment is on an at-will basis in accordance with state law. This means that the organization is free to terminate my employment at any time, with or without cause or advance notice, in accordance with state law, and that acceptance of employment is not a contract or employment for any specified time. Similarly, I am free to terminate my employment with HUF at any time for any reason. This at-will provision may be modified or waived only in a written agreement signed by an authorized representative of HUF. I agree to conform to the rules and regulations of the organization, and I understand that the organization has complete discretion to modify such rules and regulations at any time.

I authorize HUF or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless to the extent permitted by federal, state, and local law, any party delivering information to the organization or its duly-authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above-requested information. I hereby release from liability HUF and its representatives for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by HUF, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this organization. I also understand this organization employs only individuals who are legally eligible to work in the United States.

I certify that all of the information that I have provided on this application is true, accurate, and complete.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that the organization, to the extent permitted by federal, state, and local law, can test the applicant for controlled substances, conduct inspections of property without notice, and communicate screen results to HUF personnel who need to know, the applicant, and the applicant's legal guardian.

\_\_\_\_\_  
Parent/Legal Guardian

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date