Asperment Small Business Development Center, Inc.

9660 US Hwy 83 S Aspermont, TX 79502 940-989-3538

Application for Employment Instructions

Thank you for your interest in employment with Aspermont Small Business Development Center, Inc. (ASBDC). Please fill in all the blanks on the application even if you attach a resume.

Generally, ASBDC will receive several applications for advertised positions. Each one will be carefully screened to determine if the applicant meets the job requirements and has the skills that are needed to fill the position.

Those applicants who are most qualified will be called for interviews. If you are not given an interview, it simply means that there were applicants who had more experience or whose skills more closely met the requirements of the job. You should give this process at least two to three weeks, because we often interview over a period of five to ten days, depending on the interview results, schedules, etc.

If you are called for an interview, you will receive a letter or phone call within two weeks after the interview, informing you of the interview results. If you are not interviewed, you will not receive further notification.

A timely return of the completed application is important. You may return it by mail or personally. Interviews may be held prior to the closing date for receipt of applications; however, a hiring decision will **not** be made until all applications are screened.

All employment applications are kept in our active file for **30 days** or until the position has been filled or the vacancy announcement cancelled. Applications are kept in the inactive file for a period of **one year**. If you are interested in being considered for another position with ASBDC, you should 1) ask that your application be activated if you have completed one within a year or 2) complete a new application if it has been over a year since you applied for a position with ASBDC. It is often to your benefit to complete a new Application if you have gained experience that has enhanced your job skills even if you have an application on file during the previous year.

Again, thank you for considering ASBDC.

Revised 9/24

Aspermont Small Business Development Center, Inc.

Employment Application

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Full Name:					_	Date:
	Last	First			M.I.	
Address: _						
	Street Address					Apartment/Unit #
	AA-112					
	Mailing Address					
	0"				04-4-	ZIP Code
	City				State	217 0000
Phone:				Email		
Social Secu	urity Number:					
Date Availa	ble to Begin work;					
Position Ap	plying for:					
What Foreig	gn Languages do you	Speak		Read		Write
		•				White
			18	I S KS		
Ass was abl	a to nowform the teaks required					
(with or with	e to perform the tasks required nout accommodations) for the	YES	МО			
position for	which you are applying?					
Have you e	ver worked for this company?	YES		If yes, when?		
Are you rela	ated to anyone who is presently	YES	NO			
an employe	ee?			If yes, who?		
	ated to anyone who is erving on the ASBDC Board?	YES	NO			
presently s	erving on the ASSSC Board?		NO	If yes, who?		
	years of age or older?	YES	NO			
Are you 25 insurance p	years of age or older? (for ourposes)	YES	NO			
Do you hav	e a valid Driver's License?	YES	NO			

Do you have any violations on your driving record?	g YES	NO					
If yes, explain:		P		-			
Have you ever been convicted by any federal, state or local court for violation of any federal, state, county or municipal law		NO					
If yes, explain: (An affirmative response will not necessar	rily disqual	ify you fro	m bein	g consid	dered for employment)		
If employment is offered can you submit verification of your legal right to work in th United States?	e YES	NO					
的 是一个一个一个一个一个	新沙克	Educa	ition	建			
High School:	/	Address:_					
From: D	oid you gra obtain	duate or a GED?	YES	NO			
College:		Address:_					
From: To:	Did you gr	aduate?	YES	NO	Degree:		
Other:		Address:_					
From: To:	Did you gr	aduate?	YES	NO	Degree:		
List any professional licenses or certifications, special certificates, skills, and/or qualifications (CPR, first aid, computer skills, CDL Licenses, etc.)							
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Start with current or m	ost recent employment				
Company:		1		Phone:	
A -d alua - a -				Supervisor:	
Job Title:	Starting S	Salary:\$		Ending Salary;\$	
Responsibilities:					
From:					
May we contact your p	previous supervisor for a reference?	YES	МО		
				Phone:	
Addanas					
Job Title:	Starting S	Salary:\$		Ending Salary:\$	
Responsibilities:					
From:	_				
AND THE RESIDENCE OF THE PARTY					
•				Phone:	
A dalue and				Supervisor:	
Job Title:	Starting S	alary:\$		Ending Salary:\$	
Responsibilities:					
From:	То:	Reason fo	or Leaving:		
May we contact your pr	revious supervisor for a reference?	YES	NO		
				Phone:	
			-	Supervisor:	
Job Title:	Starting S	alary:\$		Ending Salary:	
Responsibilities:					

From:	To:	Reason fo	for Leaving:
May we cor	stact your previous supervisor for a reference?	YES	NO
数数数据	Refer	ences	示字是 对的数据的 国际等于第二人的证明分析
Please list	the names of two persons not related to you,	whom you i	have known for at least one year.
Full Name:			Relationship:
Company:			Phone:
Address:			
Full Name:			Relationship:
Company:	-		Phone:
Address:			
10 - Et 200	Notice to Prospe	ctive Em	nployees
	E READ THE FOLLOWING CAR RAPH, THEN SIGN BELOW.	REFULL	LY, INITIAL EACH
under pena if any) is tro me from fu	Ity of perjury that the information provided in ue and complete, and I understand that any orther consideration for employment, and m at a later date. I understand that any job of	this employ false infor ay be just	ersonally completed this application. I declare byment application (and accompanying resume, rmation or significant omissions may disqualify tification for my dismissal from employment it conditional based on the satisfactory review of
			INITIALS
understand drug & alco subject to i any compan	that if my drug & alcohol test turns out post- shol test, I will not be eligible for hire, or if I mmediate termination. If I am employed by y required drug and alcohol testing through we result of any prohibited substance or re	itive for a particular in the second in the	mployment with ASBDC and am fully aware
			INITIALS
sources at r	management's discretion, including those rela	ated to cha	the references listed above (as well as othe paracter and credit records) to give you and any pertinent information they have, personal of hat may result from furnishing same to you.
			INITIALS
I understan	d that if offered employment, depending u	pon the p	position, I may be required as a condition o

essential functions of the job for which I am applying. I understand that refusing to submit to the physical examination will result in my not being considered for employment.
INITIALS
I understand if employment is offered, ASBDC will utilize an outside firm or firms to assist in checking information to investigate my background.
INITIALS
I understand that any job offer may be conditional upon information obtained after the offer is made. I understand that employment with this company is AT WILL. I understand this term, and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and/or salary, be terminated at any time without any prior notice, and with or without explanation. Wages will cease immediately upon termination of employment. I will not rely on any oral or written statements to the contrary unless IN WRITING, and signed by an authorized official of ASBDC. I also understand and agree that if I am hired I am required to read and abide by all rules and regulations under ASBDC policies and procedures.
INITIALS
I CERTIFY THAT I HAVE READ AND AGREE TO ALL OF THE ABOVE STATEMENTS.
Signature: Date:
Printed Name:
IT IS THE POLICY OF ASBDC THAT NO PERSON OR GROUP OF PERSONS SHALL BE DISCRIMINATED AGAINST IN EMPLOYMENT ON THE BASIS OF RACE, COLOR, RELIGION, SEX, AGE, GENETICS, NATIONAL ORIGIN, HANDICAP, POLITICAL AFFILIATION OR BELIEF, OR IN ANY MANNER EXCLUDED FROM PARTICIPATION IN OR BE DENIED THE BENEFITS OF ANY PROGRAMS OR ACTIVITY SPONSORED BY THE AGENCY.
Submit signed application to:
ASBDC 9660 US Hwy 83 S. Aspermont TX 79502

employment to undergo a physical examination for the purpose of determining whether I am able to perform the

APPLICANT EEO DATA FORM

The information requested is optional and is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will not be considered as part of the application for employment. It will be separated from the application

Last Name			First Name			Middle Name			
Address		City		State	Zip	Phone			
Gender M-Male	Birthdate	W - White	American Indian/Alaska Native	B - Black	Hispanic/ Latino	Aslan America	Native Hawaiian/ Pacific Islander	Multiracial	
F-Female		W - White	Native	B - Black		Asiaii Ailierica			
How did yo	u first find	out about t	his job?						
	Other Emp	loyee							
	Newspaper	•							
	Internet (W	/TO Websit	e)						
	Social Med	ia							
I would like	to volunta	rily report	that I am:						
	Disabled								
	Veteran								
	_				Signature - Applicant				

White (Not of Hispanic Origin) - All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East

Black (Not of Hispanic Origin) - All persons having origins in any of the Black racial groups of Africa

Hispanic - All persons of Mexican, PrertoRican, Cuban, Centeral or South American, or other Spanish culture or origin, regardless of race

Asian or Pacific Islander - All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Somoa

American Indian or Alaskan Native - All persons hoving origins in any of the original peoples of North