

Employment Application



Brenham Children's Museum, Inc, is an Equal Opportunity Employer. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

CONTACT INFORMATION

NAME (LAST, FIRST, M.I.): _____
STREET ADDRESS _____
CITY, STATE, ZIP _____
EMAIL _____
PHONE _____
EMERGENCY CONTACT _____
EMERGENCY CONTACT PHONE _____

EMPLOYMENT TYPE

POSITION APPLYING FOR: _____
EMPLOYMENT CATEGORY: 1099/CONTRACT PART TIME FULL TIME SUMMER
DESIRED SALARY RANGE: _____ DATE YOU CAN START: _____

EDUCATION & TRAINING

HIGHEST LEVEL OF EDUCATION COMPLETED:
 High School/GED Trade School Undergraduate Masters Doctorate

NAME & ADDRESS OF SCHOOL of HIGHEST LEVEL OF EDUCATION:

MAJOR/COURSES STUDIED: _____
GRADUATED OR DEGREE: YES NO

SKILLS: Please list any skills you have that are appropriate for the position you are applying for:

INTERESTS / ACCOMPLISHMENTS: You may wish to list significant experience, interests & accomplishments gained while working as a volunteer or as a hobbyist that may be useful in the position (s) you are seeking.

EMPLOYMENT HISTORY

Starting with your PRESENT or MOST RECENT EMPLOYER, list in consecutive order ALL EMPLOYMENT for at least the past THREE employers.

PRESENT OR MOST RECENT EMPLOYER

COMPANY: _____

JOB TITLE: _____ EMPLOYMENT DATES: _____

DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: _____

REASON FOR LEAVING: _____ May we contact this employer? YES NO

SUPERVISORS NAME: _____ PHONE: _____

COMPANY: _____

JOB TITLE: _____ EMPLOYMENT DATES: _____

DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: _____

REASON FOR LEAVING: _____ May we contact this employer? YES NO

SUPERVISORS NAME: _____ PHONE: _____

COMPANY: _____

JOB TITLE: _____ EMPLOYMENT DATES: _____

DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: _____

REASON FOR LEAVING: _____ May we contact this employer? YES NO

SUPERVISORS NAME: _____ PHONE: _____

REFERENCES

Please list 3 references, at least one being a professional reference

NAME: _____ RELATIONSHIP: _____

NUMBER OF YEARS KNOWN: _____ POSITION AND COMPANY: _____

EMAIL: _____ PHONE: _____

NAME: _____ RELATIONSHIP: _____

NUMBER OF YEARS KNOWN: _____ POSITION AND COMPANY: _____

EMAIL: _____ PHONE: _____

NAME: _____ RELATIONSHIP: _____

NUMBER OF YEARS KNOWN: _____ POSITION AND COMPANY: _____

EMAIL: _____ PHONE: _____

BACKGROUND CHECK

HAVE YOU EVER BEEN CONVICTED OF OR BEEN ON DEFERRED ADJUDICATION, OR ARE YOU NOW EITHER WAITING FOR TRIAL FOR OR ON DEFERRED ADJUDICATION FOR A FELONY OR MISDEMEANOR: YES NO

NOTE: CONVICTION WILL NOT NECESSARILY BAR EMPLOYMENT

IF YES, DESCRIBE IN FULL INCLUDING DATES AND LOCATIONS:

DISCLAIMER AND SIGNATURE

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED:

1. I CERTIFY THAT ALL STATEMENTS MADE ON THIS APPLICATION AND THE INFORMATION CONTAINED IN ALL OTHER DOCUMENTS I HAVE SUBMITTED IN SUPPORT OF MY APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT BRENHAM CHILDREN’S MUSEUM, INC. MAY VERIFY THE INFORMATION I HAVE FURNISHED. I HAVE NOT KNOWINGLY WITHHELD ANY INFORMATION REQUESTED ON THIS FORM WHICH MAY HAVE BEARING ON AN EMPLOYMENT DECISION. I UNDERSTAND AND AGREE THAT ANY MISSTATEMENT, FALSIFICATION, OR OMISSION OF INFORMATION SHALL BE GROUNDS FOR REFUSAL TO HIRE OR, IF HIRED, TERMINATION, REGARDLESS OF THE TIME ELAPSED BEFORE DISCOVERY.

2. I CERTIFY THAT THE FOREGOING STATEMENTS ARE ALL GIVEN OF MY OWN FREE WILL.

3. I UNDERSTAND THAT IF EMPLOYED, I WILL BY MY ACCEPTANCE OF EMPLOYMENT, AGREE TO ABIDE BY THE POLICIES AND PROCEDURES OF BRENHAM CHILDREN’S MUSEUM, INC.

4. I UNDERSTAND AND AGREE THAT MY EMPLOYMENT WITH BRENHAM CHILDREN’S MUSEUM, INC. IS AT-WILL UNLESS I HAVE A WRITTEN AGREEMENT STATING OTHERWISE, THAT IS SIGNED BY BOTH THE AUTHORIZED OFFICIAL OF BRENHAM CHILDREN’S MUSEUM, INC. AND MYSELF.

5. I UNDERSTAND THAT I WILL BE REQUIRED TO PROVIDE DOCUMENTS ESTABLISHING MY IDENTITY AND EMPLOYMENT ELIGIBILITY AS REQUIRED BY THE IMMIGRATION REFORM AND CONTROL ACT OF 1986.

6. I AUTHORIZE ANY OF THE PERSONS OR ORGANIZATIONS REFERENCED IN THIS APPLICATION TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT, EDUCATION OR ANY OTHER INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, WITH REGARD TO ANY OF THE SUBJECTS COVERED BY THIS APPLICATION, AND I RELEASE ALL SUCH PARTIES FROM ALL LIABILITY FROM ANY DAMAGES WHICH MAY RESULT FROM FURNISHING SUCH INFORMATION TO YOU. I UNDERSTAND THAT ANY JOB OFFER OR SUBSEQUENT EMPLOYMENT MAY BE CONDITIONED ON BRENHAM CHILDREN’S MUSEUM, INC. RECEIPT OF A SATISFACTORY BACKGROUND INQUIRY

7. I AUTHORIZE BRENHAM CHILDREN’S MUSEUM, INC. TO OBTAIN BOTH CRIMINAL HISTORY AND SEXUAL OFFENDER RECORD INFORMATION AND I UNDERSTAND THAT THE INFORMATION I AM PROVIDING ABOUT AGE, GENDER, AND ETHNICITY IS USED ONLY FOR OBTAINING SAID BACKGROUND CHECKS AND IS HELD IN STRICT CONFIDENCE.

Signature_____ Date_____