



Employment Application

Bay Aging is an Equal Opportunity Employer. All applicants will be considered for employment without discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity, national origin, age, veteran or disability status.

Bay Aging is committed to providing access, equal opportunity, and reasonable accommodation for individuals with disabilities in employment, its services, programs, and activities. To request reasonable accommodation, contact MaDena DuChemin-Jones, Director, Human Resources at (804) 758- 2386 ext. 1228 or mduchemin@bayaging.org.

Complete the application and submit it to Bay Aging:

- By fax to (804) 758-5773.
- By mailing to Bay Aging, P.O. Box 610, Urbanna, VA 23175.

NAME: _____

POSITION APPLIED FOR: _____

ADDRESS: _____

Are you 18 years of age or older? Yes No

Phone Number: _____

Contact Email: _____

Home Cell Other

REFERENCES: (application requires three persons that are not related to you)

Reference #1	Reference #2	Reference #3
Name: _____	Name: _____	Name: _____
Phone Number: _____	Phone Number: _____	Phone Number: _____
Email: _____	Email: _____	Email: _____

EDUCATION

Institution Name	Location (city & state)	Grade Completed	Certificate or Degree (if applicable)

ADDITIONAL SKILLS:



EMPLOYMENT RECORD (LIST MOST RECENT JOB FIRST)

MAY WE CONTACT YOUR PRESENT/ RECENT EMPLOYER/SUPERVISOR? YES NO

Employer's Name _____ Employer's Address _____ Job Title & Duties: _____ _____ _____	Dates of Employment Employer's Phone # Supervisor's Name: Reason for Leaving:	from: _____ _____ _____ _____	to: _____ _____ _____ _____
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QUALIFICATION QUESTIONS

Do you have a current driver’s License? (Current DMV record may be required for hire) YES NO

Based on stated requirements of the position, are you capable of performing the essential functions of this position, with or without reasonable accommodations? YES NO

Have you ever worked for this Agency before under your current name or another name, and if so, when and why did you leave?

Have you ever been dismissed, forced to resign, or resigned to avoid dismissal from a job? YES NO

BAY TRANSIT APPLICANTS ONLY:

Have you ever tested positive on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two (2) years?

Yes No

Have you ever refused to test on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?

Yes No

CERTIFICATION:

I hereby certify that all entries on both sides and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment with this agency. I understand that all information on this application is subject to verification. I also consent to references and former employers and educational institutions listed being contacted regarding this application.

Date: _____ Applicant’s Signature: _____