## MULTICULTURAL COALITION Job Application

Founded in 2001, Multicultural Coalition is a small, but mighty force in supporting immigrant, refugee, and other vulnerable newcomers to the community. Through individually catered services, we team up with clients to remove and overcome barriers, with accommodations made for the client's native language. These newcomers walk out of our door with housing, employment, insurance, or resolved legal problems, ultimately fulfilling dreams of building a better life in Grand Island.

Our mission statement—empowering individuals, embracing cultures, strengthening community—entails building human capital. Our organizational culture and the programs we invest in promote the socio-economic viability of Grand Island now and in the future, at the same time as they build capacities staff, volunteers, interns, and supporters who make up our team.

Multicultural Coalition is an equal opportunity employer. Multicultural Coalition does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service, or any other characteristic protected by law.

## PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name		Date	Date				
Address							
E-mail Address			Mobile Phone				
Are you eligible to work in the U.S?			Are you at least 18 years or older?				
YesNo		Yes _	YesNo				
Have you ever been terminated from employment or asked to resign by an employer?YesNo If yes, please provide company names and details:							
EMPLOYMENT DESIRED							
Date you can start	Hourly rate/Salary de	esired	Position desired				
Are you currently employed?		If so, may we inquire of your present employer?					
YesNo		Yes No					

## **REFERRAL SOURCE** How did you hear about us? Social Media Referral Other Yes \_\_\_No If yes, who? \_\_\_\_ Do you know anyone who works for our company? **EMPLOYMENT HISTORY** Include your last five (5) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. Put additional employers on the back of this page. Incomplete information could disqualify you from further consideration. **Employer Name** Phone Job Title Dates from Dates to Immediate Supervisor & Title Reason for Leaving **Employer Name** Phone Job Title Dates from Dates to Immediate Supervisor & Title Reason for Leaving Phone **Employer Name**

Dates from

Job Title

Immediate Supervisor & Title

Reason for Leaving

Dates to

Employer Name		Phone	Phone			
Job Title		Dates from	Dates to			
mmediate Supervisor	r & Title					
Reason for Leaving						
EDUCATION	Name and lo	cation of school	Degree Received			
High School						
College or University						
rade or Business Sc	hool					
EFERENCES	convicted of a crime?Yes e persons not related to you, wh		least three (3) years.			
Name	Phone & Email	Company/Assoc	ciation Years Acquainted			
l						
3						

## Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Multicultural Coalition to hire me. If I am hired, I understand that either Multicultural Coalition or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Multicultural Coalition has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Multicultural Coalition true and complete information on this application. No requested information has been concealed. I authorize Multicultural Coalition to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature				
-				
Date				

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.



Empowering individuals. Embracing cultures. Strengthening community. (308) 385-5242 || mcofgi.org