

**LIFE ENRICHMENT CENTER OF CLEVELAND COUNTY, INC.**

**110 Life Enrichment Blvd., Shelby, NC 28150 704-484-0405**

**Download/scan/email completed applications to [erin@lifeenrichmentcenter.org](mailto:erin@lifeenrichmentcenter.org)**

**Return the application in person or mail to the address above.**

**APPLICATION FOR EMPLOYMENT** (*Confidential*)

**Current Information:**

Application Date: \_\_\_\_\_

Name \_\_\_\_\_  
*Last First Middle*

Position(s) applied for \_\_\_\_\_

This application is for: Full-Time Part-Time PRN (*Circle all that apply*)

Date available for work \_\_\_\_\_

Present Mailing Address \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Business \_\_\_\_\_ If none, where can  
you be reached by phone? \_\_\_\_\_ Are you over 18 years of age? Yes \_\_\_ No \_\_\_

**Education** (*Give your complete educational history below*):

Circle highest school year completed: 1 2 3 4 5 6 7 8 9 10 11 12

High School: Name \_\_\_\_\_ Location \_\_\_\_\_

Education Beyond High School	Name & Location	Circle Number Years Completed	Credit Hours	Degree or Diploma	Major Subject
College or University		1 2 3 4			

Please include any additional courses, workshops, or seminars that relate to the position(s) you are applying for: (Include skills with equipment, machines you operate, special computer knowledge, laboratory techniques, typing and wpm., etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you enrolled in school now? \_\_\_\_\_ Where? \_\_\_\_\_

Course of Study \_\_\_\_\_ Expected completion date \_\_\_\_\_

Fields of work for which you are licensed, registered, or certified: \_\_\_\_\_

**General Information:**

Are you currently employed?\_\_\_\_\_ If yes, may we inquire of your employer regarding your experience and qualifications?\_\_\_\_\_

Have you ever been convicted of any offense (other than minor traffic violations under \$100)? A conviction will not necessarily disqualify you from employment. \_\_\_\_\_

**Employment Record (List your present or most recent employer first):**

A. Title of present or last position\_\_\_\_\_ Starting salary\_\_\_\_\_ Last salary\_\_\_\_\_
Date employed\_\_\_\_\_ Date separated\_\_\_\_\_ Full-time\_\_\_\_\_ Part-time\_\_\_\_\_
Employer\_\_\_\_\_
Name and title of supervisor\_\_\_\_\_
Address\_\_\_\_\_ Telephone#\_\_\_\_\_
Duties\_\_\_\_\_
Reason for leaving\_\_\_\_\_

B. Title of next to last position\_\_\_\_\_ Starting salary\_\_\_\_\_ Last salary\_\_\_\_\_
Date employed\_\_\_\_\_ Date separated\_\_\_\_\_ Full-time\_\_\_\_\_ Part-time\_\_\_\_\_
Employer\_\_\_\_\_
Name and title of supervisor\_\_\_\_\_
Address\_\_\_\_\_ Telephone#\_\_\_\_\_
Duties\_\_\_\_\_
Reason for leaving\_\_\_\_\_

C. Title of next position\_\_\_\_\_ Starting salary\_\_\_\_\_ Last salary\_\_\_\_\_
Date employed\_\_\_\_\_ Date separated\_\_\_\_\_ Full-time\_\_\_\_\_ Part-time\_\_\_\_\_
Employer\_\_\_\_\_
Name and title of supervisor\_\_\_\_\_
Address\_\_\_\_\_ Telephone#\_\_\_\_\_
Duties\_\_\_\_\_
Reason for leaving\_\_\_\_\_

Have you ever been dismissed or forced to resign from any employment? Yes\_\_\_ No\_\_\_ If yes, please explain.\_\_\_\_\_

**Please read carefully before signing:**

-The Life Enrichment Center of Cleveland County, Inc. is an Equal Opportunity Employer. It is our policy to abide by all Federal and State laws prohibiting employment discrimination solely on the basis of a person’s race, color, national origin, religion, age, sex, or disability.

-I hereby certify that all statements of this application are true and complete to the best of my knowledge and belief. Misrepresentations, omissions of facts, or incomplete information requested in the application may remove me from further consideration for employment. If employed, I understand that misrepresentations, omissions of facts, or incomplete information requested in this application may be considered cause for termination.

- I hereby authorize any previous employer, school, personal reference, and any federal, state or local criminal justice agency to release all information requested by the Life Enrichment Center concerning my academic abilities, job performance, attendance, etc., unless otherwise indicated. I also agree that if hired I authorize annual background checks.

Signature\_\_\_\_\_ Date\_\_\_\_\_

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