

TRAHC •TEXARKANA REGIONAL ARTS & HUMANITIES COUNCIL, INC. 321 West Fourth 903-792-8681

321 West Fourth P.O. Box 1171 Texarkana, USA 75504-1171

Fax 903-793-8510 email: artsinfo@trahc.org

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status.

(PLEASE PRINT) Date of Application										
Position(s) Applied For										
Referral Source: Advertisement Friend Other	<u> </u>	☐ Walk-In	Employment Agency							
Name										
			MIDDLE							
Address NUMBER STREET C	ITY	STATE	ZIP CODE							
Telephone ()Soci		nber <u>XXX -</u>	XX -							
Email Address:										
If employed and you are under 18, can you furnis		t? Yes	No Not Applicable							
Have you filed an application here before?			ite							
Have you ever been employed here before?	_									
Are you employed now? Yes No May										
Are you prevented from lawfully becoming emp in this country because of Visa or Immigration St Proof of citizenship or immigration status will be required upo ployment.)	tatus?	es 🗌 No								
On what date would you be available for work?										
Are you available to work Full Time	Part Time	_								
Are you on a lay-off and subject to recall?	es No									
Can you travel if a job requires it?	No									
Have you been convicted of a felony within the Conviction will not necessarily disqualify applicant from a	last 7 years? [employment.)	Yes No)							
f Yes, please explain										
Veteran of the U.S. Military service? Tyes T	¬ No If Yes.	Branch								

Indicate languages you speak, read, and/or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

cist professional, trade, business or civic activities and offices held. (You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status):
Give name, address and telephone number of three references. Please include at least two former employers and at least one personal references who is not related to your
ployers and at least one personal reference who is not related to you.
Special Employment Notice to Disabled Veterans, Vietnam Era Veterans, and Individuals With Physical Or Mental Disabilities.
Government contractors are subject to 38 USC 2012 of the Viet Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which requires government contractors to take affirmative action to employ and advance in employment qualified disabled individuals.
If you are a disabled veteran, or have a physical or mental disability you are invited to volunteer this information which will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect your consideration for employment.
If you wish to be identified, please sign below.
☐ Disabled Individual ☐ Disabled Veteran ☐ Vietnam Era Veteran
Signed

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names which indicate race, color, religion, gender, national origin, disability or other protected status.

Employer	Telephone	Dates E	mployed	Work Performed				
		From	То	Work Ferromed				
Address								
Job Title		Hourly R	ate/Salary					
		Starting	Final					
Supervisor								
Reason for Leaving								
Employer	Telephone	Dates E	mployed	Work Performed				
		From	То	Work renomied				
Address								
Job Title		Hourly R	ate/Salary					
		Starting	Final					
Supervisor								
Reason for Leaving								
Employer	Telephone	Dates E	mployed	Work Performed				
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Job Title		Hourly R	ate/Salary					
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Supervisor								
Reason for Leaving								
Employer	Telephone	Dates E	mployed	Work Performed				
		From	То	Work i enomied				
Address								
Job Title		Hourly R	ate/Salary					
		Starting	Final					
Supervisor								
•								
Reason for Leaving								
If vo	u need additional space u	planca continua	on a congrate	shoot of paper				

If you need additional space, please continue on a separate sheet of paper

Special Skills and Qualifications	
Summarize special skills and qualifications acquired from employment or other experience.	

	Elementary				High			College/University				Graduate/ Professional					
School Name					_			_									
Yrs Completed/Degree	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course Of Study:																	
Describe Specialized Training, Apprenticeship, Skills and Extra-Curricular Activites.																	
Honors Received: Stat	te any	y ado	oitik	nal i	nforma	tion yo	ou fee	l may	be help	oful to u	ıs in c	onsid	ering yo	our app	olicatio	on.	
		_	_	_					ateme								
I certify that answers I authorize investigation for each of the applicant wishin whether on not applicant understonstitute an employeand employee in write In the event of emplointerview(s) may resulations of the employee	emplemplemplemplemplemplemplemplemplempl	of all old of all old old old old old old old old old o	I stament consare I at nontra	atem nt de t sha side beir beith act u	nents of ecision all be of ered for ng acconer this unless stand I und	contain. consider emprepted s documents a spetal that factorized that factorized significations are serviced significations.	derectory derectory description descriptio	d act ment hat ti nt no docu or m also,	ive for beyon me. or any cument isleading that I a	a peri ad this offer of to that ng info	od o time f emp t affe	f time periodoyict is	e not to the short from the second given	ent as to excould in ted by in my oy all	eed 4 nquir ne em 7 the appl	45 da re as nploy emp	ays. to yer loyer on or