



Central Susquehanna Opportunities, Inc.
"A Community Action Agency"
www.censop.com



CSO, Inc. Application for Employment

Please read the following before completing the application.

1. There is no guarantee of a job offer or job interview in completing this application. This application will be considered with others who have submitted applications and decisions about interviews will be based on this comparison.
2. This application must be completely filled out in order for it to be considered for employment.
3. If the information provided on the application cannot be satisfactorily verified by employment reference checks, this application will be considered invalid.
4. Due to the large number of applicants CSO, Inc. receives and the competitive nature of our employment process, specific reasons for employment decisions will not be released.
5. In completing the CSO, Inc. application, you will be subject to the following checks:
 - i. Employment Reference Check from former Employers
 - ii. Criminal Record Check
 - iii. Child Abuse Clearance

The Criminal Record Check and Child Abuse Clearance must have been obtained within the last year.

I have read and understand the above statements.

Signature of Applicant

Date

Applicant's Name (Printed)

2 East Arch Street, Suite 313
Phone: (570) 644-6575

Shamokin, PA 17872
Fax: (570) 644-6580

Gale Zalar
Chief Executive Officer

Greg Sacavage
Board Chairman



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CSO, INC. APPLICATION FOR EMPLOYMENT

CSO considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. **CSO, INC. IS AN EQUAL OPPORTUNITY EMPLOYER.**

PLEASE PRINT

Position Applied For:

Date of Application

How did you learn about CSO, Inc.?

<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment	<input type="checkbox"/> Relative	<input type="checkbox"/> Other
<input type="checkbox"/> Agency		

Last Name

First Name

Middle Initial

Address

City

State

ZIP Code

Telephone Number

Social Security Number

If you are under 18 years of age, can you provide required proof of your eligibility to work?

YES NO

Have you ever filed an application with us before?

YES NO

If yes, give date:

Have you ever been employed with us before?

YES NO

If yes, give date:

Are you currently employed?

YES NO

May we contact your present employer?

YES NO

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

YES NO

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work?

Are you available to work: Full Time Part Time Temporary

Are you currently on "lay-off" status and subject to recall?

YES NO

Can you travel if a job requires it?

YES NO

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Have you ever been convicted or plead guilty to a crime? YES NO

Note: You may omit any offenses that occurred prior to your 18th birthday that are not available to the public
 Conviction of a criminal offense is not always a bar to employment. Each offense is evaluated individually.

If you have a criminal record, please list the charges on which you were convicted or adjudicated, the dates they occurred and the location at which they were committed:

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate / Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read, and / or write

	Fluent	Good	Fair
Speak			
Read			
Write			

List any specialized training, job-related skills and extra-curricular activities.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related and volunteer activities and military service assignments. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Work Performed
	To	From	
Address			
Telephone Number(s)	Hourly Rate / Salary		
	Starting	Final	
Job Title			
Reason for leaving			

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Employer	Dates Employed	Work Performed
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	To	From	
Address			
Telephone Number(s)	Hourly Rate / Salary		
	Starting	Final	
Job Title			
Reason for leaving			

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

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

ADDITIONAL INFORMATION

Specialized Computer Skills

_____ Word	_____ Outlook
_____ Excel	_____ Internet
_____ PowerPoint	_____ Other _____

Professional Certifications

Please list any Professional Certifications you have obtained.

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation are available upon request.

YES	NO
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REFERENCES (Business References Only)

Name _____ Relationship _____

Address _____ Phone number(s) _____

Name _____ Relationship _____

Address _____ Phone number(s) _____

Name _____ Relationship _____

Address _____ Phone number(s) _____

APPLICANT'S STATEMENT

Authority to Release Information: By my signature to this application, I consent to the release of information to authorized officers, agents and/or employees of CSO, Inc., from any of my past employers and any training or educational facilities I have attended. I understand that this information may include but not be limited to information concerning my past and present work; including, my personnel files, attendance records, evaluations, educational records including transcripts, and military service and law enforcement records. In addition, I authorize and consent to CSO, Inc., its officers, agents and/or any employees to make inquiries of third parties, including but not limited to credit bureaus. I do further release CSO, Inc., its officers, agents and/or employees and any of the parties contacted by them, from any and all claims or liability of whatever nature that I may have as a result of any inquiry or response given to such inquiry in connection with my application for employment.

Signature of Applicant

Date

Certification by Applicant: By my signature, I do hereby certify and affirm that all of the statements on this application are true and correct. I further acknowledge that any misrepresentations, falsifications, or material omissions of information or data on this application may result in my exclusion from further consideration, or my termination from employment, if I have been hired. I further acknowledge that I will provide additional and supplemental written information to CSO, Inc., in the event that there are any changes in the information provided herein both during the time my application for employment is being considered and, after I have become employed by CSO, Inc.

Signature of Applicant

Date

17.04.20