

Application for Employment

155 Gibbs Street, Suite 300, Rockville, Maryland 20850

VisArts is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a VisArts representative.

Please fill out all of the sections below:

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Name:		
Address:		
City, State and Zip Code:		
Telephone Number:		
Email Address:		
Date of Application:		
Employment Position For what position are you applying?(full time) (part time)		
How did you hear about this position?		
On what date can you start working?		
Salary desired:		
Personal Information		
Have you ever applied to or previously worked for VisArts?	Yes	No
If yes, when?		
Do you have any friends, relatives, or acquaintances working for VisArts	Yes	No
If yes, state name & relationship:		
Are you a U.S. citizen or approved to work in the United States?	Yes	No
What document can you provide as proof of citizenship or legal status?		

If yes, please describe accommodations required below.

Job Skills/Qualifications (You may attach a resume as a supplement to this application)

Please list below the skills and qualifications you possess for the position for which you are applying:

(Note: VisArts complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Education and Training

High School

Name	Location (City, State)	Year Graduated	Degree Earned

College/University

Name	Location (City, State)	Year Graduated	Degree Earned

Vocational School/Specialized Training

Name	Location (City, State)	Year Graduated	Degree Earned

Military:

Are you a member of the Armed Services? What branch of the military did you enlist? What was your military rank when discharged? How many years did you serve in the military?

Previous Employment

Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	

Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name:	
Employer Name: Job Title:	
Job Title:	
Job Title: Supervisor Name:	
Job Title: Supervisor Name: Employer Address:	
Job Title: Supervisor Name: Employer Address: City, State and Zip Code:	
Job Title: Supervisor Name: Employer Address: City, State and Zip Code: Employer Telephone:	

<u>References</u>

Please provide three personal and professional reference(s) below:

Reference Name	Contact Information

AT-WILL EMPLOYMENT

The relationship between you and the VisArts is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the VisArts. No representative of VisArts has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and VisArts' Executive Director.

Applicant	Date:
Signature:	