



APPLICATION FOR EMPLOYMENT
805 Marina Road Titusville, FL 32796
(321)269-8444 Ext. 208 Fax: (321) 269-8483

Vectorworks is An Equal Opportunity Employer and a Drug Free Workplace. We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, or veteran status, sexual orientation, or any other legally protected status.

APPLICANT INFORMATION			
Last Name	First Name	M.I.	Date
Street Address			Apartment/Unit #
City	State	Zip	Telephone ()
Are you over 18 years old? Yes ___ No ___		Social Security Number	
Notice of Collection of Social Security Number In accordance with s. 119.071(5)(a)2 F.S., your social security number is requested for the purpose of payroll eligibility verification, processing employment benefits, applicant and employee background checks, and income reporting, and will be used solely for these purposes.			
Position Applied for	Full Time ___ Part Time ___	Can you work nights?	Can you work weekends?
Referral Source:		Date Available	Desired Salary
Are you a citizen of the United States? Yes ___ No ___ If no, are you authorized to work in the U.S.? Yes ___ No ___			
Have you ever worked for this company? Yes ___ No ___ If so, when?			
Have you ever had an adjudication withheld, or refused a surety bond? Yes ___ No ___ If yes, explain?			
Have you ever been convicted of a felony? Yes ___ No ___ If yes, explain below			
Date	Offense Charge	Disposition/Sentence	
A "YES" answer to this question will not necessarily bar you from employment. The nature, severity, and date of the offense in relation to the position for which you are applying are considered.			

EDUCATION			
High School		Address	
From	To	Did you graduate Yes___ No ___	Degree
College		Address	
From	To	Did you graduate Yes___ No ___	Degree
Business or Trade School		Address	
From	To	Did you graduate Yes___ No ___	Degree

DO YOU HAVE A DRIVER'S LICENSE? Yes ___ No ___

What is your means of transportation to work? _____

Driver's License No. _____ State of Issue _____ Expiration date _____

Operator ___ Commercial (CDL) ___ Chauffeur ___

PREVIOUS EMPLOYMENT

Company #1

Phone ()

Address

Supervisor

Job Title

Starting Salary \$

Ending Salary \$

List the responsibilities, duties performed, skills used or learned, advancements or promotions while you worked at this company.

From To

Reason for Leaving

May we contact your previous supervisor for a reference? Yes ___ No ___

Company #2

Phone ()

Address

Supervisor

Job Title

Starting Salary \$

Ending Salary \$

List the responsibilities, duties performed, skills used or learned, advancements or promotions while you worked at this company.

From To

Reason for Leaving

May we contact your previous supervisor for a reference? Yes ___ No ___

Company #3

Phone ()

Address

Supervisor

Job Title

Starting Salary \$

Ending Salary \$

List the responsibilities, duties performed, skills used or learned, advancements or promotions while you worked at this company.

From To

Reason for Leaving

May we contact your previous supervisor for a reference? Yes ___ No ___

Company #4		Phone ()
Address		Supervisor
Job Title	Starting Salary \$	Ending Salary \$
List the responsibilities, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? Yes ____ No ____		

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

REFERENCES	Please list three professional references
#1 Full Name	Relationship
Company	Phone ()
Address	
#2 Full Name	Relationship
Company	Phone ()
Address	
#3 Full Name	Relationship
Company	Phone ()
Address	

MILITARY SERVICE

Due to Federal Reporting Requirements, you need to "X" one of the following categories that apply to your personal status:

If you are of Non-Veteran Status please mark here ____.

Are you considered to be:

_____ Special Disabled Veteran meaning (A) a veteran who is entitled to compensation (or who but for receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability (i) rated at 30 percent or more, or (ii) rated at 10 or 20 percent in the case of a veteran who has been determined under Section 3106 of Title 38, U.S.C. to have a serious employment handicap or (B) a person who was discharged or released from active duty because of a service connected disability.

_____ Veteran of the Vietnam-era meaning a person who: (A) served in the military, ground, naval or air services or the United States on active duty for a period of more than 180 days, and was discharged or released there from with other than a dishonorable discharge, if any part of such active duty occurred: (i) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (ii) between August 5, 1964, and May 7, 1975 all other cases; or (B) was discharged or released from active duty for a service connected disability of any of such active duty was performed (i) in the Republic of Vietnam between February 28, 1961 and May 7, 1975 or (ii) between August 5, 1964 and May 7, 1975, in all other cases.

_____ Other Veterans meaning veterans, who served in the military, ground, naval or air service of the United States on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized. Wars, campaigns, and expeditions of the Armed Forces since WWII (from December 7, 1964 through April 28, 1952) which qualify for Veteran's Preference. Any Armed Forces expeditionary Medal is qualifying for the veteran's preference.

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Vectorworks to verify their accuracy and to obtain reference information on my work performance. I hereby release Vectorworks from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature	Date
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