



Application for Employment

4301 Shamrock Dr , Charlotte, NC, 28215 * (704) 537-1772 * Fax (704) 537-1702

Personal Information		Date
Name (last, first, middle)		
Street Address		
City	State	Zip code
Home telephone	Cell phone	Email:
Position applying for		Full time Part time
How did you find out about this job opening?		
Are you legally eligible for U.S. employment? No Yes		
Are you over 18? No Yes		
Date and year you applied with us before, if applicable.		
Have you ever worked for the Academy before No Yes		
(Please list under what name and what job title)		

Education	Name and location	Course of Study	Did you graduate?	Degree or Diploma
Post Graduate				
College or University				
Business, Trade, or Technical				
High School				

Circle number of years completed : 1 2 3 4 5 6 7 8 9 10 11 12 14 15 16 16+

List any additional skills, knowledge, experience, or other relevant qualifications:

Please give us your complete employment history. Attach additional sheets as needed.

Name (last, first, middle)

Employment History	
1	Company name Telephone ()
	Street address
	City State Zip code
	Employed from month/year Employed to month/year
	Name of supervisor
	Reason for leaving
	Job title
	Description of work
2	Company name Telephone ()
	Street address
	City State Zip code
	Employed from month/year Employed to month/year
	Name of supervisor
	Reason for leaving
	Job title
	Description of work
3	Company name Telephone ()
	Street address
	City State Zip code
	Employed from month/year Employed to month/year
	Name of supervisor
	Reason for leaving
	Job title
	Description of work
4	Company name Telephone ()
	Street address
	City State Zip code
	Employed from month/year Employed to month/year
	Name of supervisor
	Reason for leaving
	Job title
	Description of work

Name (last, first, middle)

Employment /Professional References			
1	Name		
	Company name	Telephone ()	
	Street address	Position	
	City	State	Zip code
2	Name		
	Company name	Telephone ()	
	Street address	Position	
	City	State	Zip code
3	Name		
	Company name	Telephone ()	
	Street address	Position	
	City	State	Zip code
4	Name		
	Company name	Telephone ()	
	Street address	Position	
	City	State	Zip code

Volunteer, Community, Charitable, and/or other nonpaid experience			
Organization		Telephone ()	
Street address			
City		State code	Zip
Supervisor	From month/year	To month/year	
Description of Duties			
Organization		Telephone ()	
Street address			
City		State code	Zip
Supervisor	From month/year	To month/year	
Description of Duties			
Organization		Telephone ()	
Street address			
City		State code	Zip
Supervisor	From month/year	To month/year	
Description of Duties			

Name (last, first, middle)

What Can you contribute to Charlotte Islamic Academy?

I certify, to the best of my knowledge, that all information given by me in this application is true and correct. I understand that false or misleading statements made by me or consequential omissions of any kind in the application process are sufficient cause for my not being hired or for my dismissal if I am already employed no matter when discovered. I authorize Charlotte Islamic Academy to investigate all information

contained in this application. The employers, schools, or individuals named are authorized to give information regarding my employment, character, and qualifications, are hereby released from all liability from issuing such information. I understand that if hired, my employment is not for any definite period of time or successions of periods, is not governed by any written or oral contract,

and is considered an "at-will" arrangement. This means that either Charlotte Islamic Academy or I am free to terminate my employment at any time for any reason, so long as there is no violation of applicable law.

Date

Signature