

GREATER CHARLOTTEVILLE HATITAT FOR HUMANITY

APPLICATION COVER SHEET

Please answer all questions. Resumes are not a substitute for a completed application.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

Applicant Name _____ Date _____

Position Applied For (list only one) _____

Telephone Number () _____ - _____ Alternate Telephone Number () _____ - _____

Present Address _____

City _____ State _____ Zip Code _____

Email Address _____

If applicable, below, list any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc. Please indicate NA if not applicable.

Greater Charlottesville Habitat for Humanity Affirmative Action Voluntary Information

Completion of information below is voluntary.

We consider all applicants for positions without regard to race, color, religion sex, national origin, citizenship, age mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

In an effort to comply with requirements regarding government record keeping, reporting and other legal obligations that may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this form is not a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

Position applied for _____

Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- | | |
|--|--|
| <input type="checkbox"/> White (not of Hispanic origin) | <input type="checkbox"/> White (of Hispanic origin) |
| <input type="checkbox"/> Black (not of Hispanic origin) | <input type="checkbox"/> Black (of Hispanic origin) |
| <input type="checkbox"/> Asian/Pacific Islander (not of Hispanic origin) | <input type="checkbox"/> Asian/Pacific Islander (of Hispanic origin) |
| <input type="checkbox"/> American Indian/Alaskan Native (not of Hispanic origin) | <input type="checkbox"/> American Indian/Alaskan Native (of Hispanic origin) |
| <input type="checkbox"/> Multiracial (not of Hispanic origin) | <input type="checkbox"/> Multiracial (of Hispanic origin) |

For Administrative use Only

Hired Yes No

Position hired for: _____ Date of hire: _____

From the EEO job classifications listed below, which one best describes the position filled?

- | | | |
|---|--|--|
| <input type="checkbox"/> Officials and Managers | <input type="checkbox"/> Sales Workers | <input type="checkbox"/> Operatives (semi-skilled) |
| <input type="checkbox"/> Professionals | <input type="checkbox"/> Office and Clerical Workers | <input type="checkbox"/> Laborers (unskilled) |
| <input type="checkbox"/> Technicians | <input type="checkbox"/> Craft Workers (skilled) | <input type="checkbox"/> Service Workers |

Notes _____

Completed by _____ Date _____