EMPLOYMENT APPLICATION

Central Pennsylvania Blood Bank ("Blood Bank") is an Equal Opportunity employer and complies with all applicable Federal, State and local laws concerning discrimination in employment. No question in this Application is intended to elicit information in violation of any such law, nor will any information obtained in response to any question be used in violation of any such law. Please read this Application carefully.

BACKGROUND INFORMATION

Last Name First Middle	Date of Application
If any of your educational or employment records are under any name(s) other than that shown above, please provide the name(s) under which these records may be located	Cell Phone ( )
Street Address	Home Phone ( )
City State Zip	Social Security No.
Were you previously employed by the Blood Bank? ____Yes ____No If "Yes," please give dates of employment and location(s)	Have you reached your 18th birthday? ____Yes ____No

Have you previously applied for employment to the Blood Bank? ____Yes ____No
If "Yes," please give date(s) and locations(s)

Since reaching age 18, have you been convicted of a felony or misdemeanor which has not been annulled, expunged, or sealed by a court? ____Yes ____No
If "yes," please describe the conviction in full detail, including date(s), location(s) and the nature of the offenses(s)

*A felony or misdemeanor conviction will not automatically result in your disqualification from employment. Instead, convictions will be considered only to the extent they relate to the job for which you have applied. However, failure to disclose a conviction and/or mischaracterization of a conviction will automatically result in your ineligibility for employment and/or termination of employment (even if the conviction would not have barred your employment had it been properly disclosed).

JOB INTEREST

Position Applying For

Employment Status Desired (Check all that apply)	Hours available to Work:						
____ Full-Time ____ Part-Time ____ Temporary	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.

If offered employment, when will you be available to start work?

EDUCATION, TRAINING AND PROFESSIONAL LICENSURE/REGISTRY/CERTIFICATION

The Blood Bank may verify with the applicable educational/training facility all information disclosed in this Section.

School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Type of Diploma or Degree
High School				____ Yes ____ No	
College or University				____ Yes ____ No	
Graduate or Professional School				____ Yes ____ No	
Trade of Business School				____ Yes ____ No	

Do you hold other professional registry/certification? ____ Yes ____ No If "yes," please provide particulars:

Describe any other education, training, skills or certificates you possess which are relevant to the position for which you have applied:

EMPLOYMENT RECORD

Starting with your current or most recent, list all employers past and present. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. The Blood Bank may verify all information disclosed in this Section.

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Company Name of Current or Most Recent Previous Employer		Base Pay (annual) Start $_____ Last $_____	Type of Business
Street Address		Other Compensation (Shift Premium, Bonus) $_____ per	Employed ____ Full-Time ____ Part-Time
City, State and Zip		Telephone ( )	May We Contact? ____ Yes ____ No
Date Hired	Date Separated	Name and Title of Immediate Supervisor	
Reason for Leaving			
State Current/Last Job Title and Describe Your Work:			
Significant Job-Related Accomplishments:		Describe how these accomplishments benefited your employer:	

2	Company Name of Previous Employer		Base Pay (annual) Start $_____ Last $_____	Type of Business
	Street Address		Other Compensation (Shift Premium, Bonus) $_____ per	Employed ____ Full-Time ____ Part-Time
	City, State and Zip		Telephone ( )	May We Contact? ____ Yes ____ No
	Date Hired	Date Separated	Name and Title of Immediate Supervisor	
	Reason for Leaving			
	State Current/Last Job Title and Describe Your Work:			
	Significant Job-Related Accomplishments:	Describe how these accomplishments benefited your employer:		

3	Company Name of Current or Most Recent Previous Employer		Base Pay (annual) Start $_____ Last $_____	Type of Business
	Street Address		Other Compensation (Shift Premium, Bonus) $_____ per	Employed ____ Full-Time ____ Part-Time
	City, State and Zip		Telephone ( )	May We Contact? ____ Yes ____ No
	Date Hired	Date Separated	Name and Title of Immediate Supervisor	
	Reason for Leaving			
	State Current/Last Job Title and Describe Your Work:			
	Significant Job-Related Accomplishments:	Describe how these accomplishments benefited your employer:		

ADDITIONAL JOB-RELATED EXPERIENCE

Describe any other experiences (e.g., volunteer work), qualifications, skills or abilities which you possess in addition to those you have outlined above and which you consider important to the successful performance of the job for which you are applying.

REFERENCES

List current and former supervisors, co-workers, colleagues and/or professional acquaintances not related to you who can provide direct knowledge of your qualifications and abilities. Please provide 1-2 supervisory references.

Name	Relationship to You	Occupation and Title	Phone No. (Include Area Code)	Years Known

APPLICANT'S CERTIFICATION

Please read carefully and, if you need clarification, ask questions before signing below.

I certify that the answers given by me to the foregoing questions and the statements made by me in this Application are true, correct and complete. I understand that, if I become employed, any misrepresentation or omission of fact in this Application may result in my discharge from employment.

I authorize the Blood Bank as part of its evaluation of my suitability for employment, to verify all education, training and professional licensure/certification/registry claimed by me and to secure from my previous employers and references information concerning my professional accomplishments, skills, character and ability. I further authorize the Blood Bank to secure from the appropriate sources information concerning criminal convictions and agree to execute the written authorizations necessary for the Blood Bank to obtain access to and copies of records pertaining to this information. If I am hired, I agree to immediately notify the Blood Bank if I am convicted of a felony or any crime involving theft or dishonesty and I further authorize the procurement of criminal record checks throughout my employment with the Blood Bank. For these purposes, a photocopy or electronic version of my signature which appears below shall serve in the same capacity as an original.

In compliance with the Federal Immigration Reform and Control Act, I agree, if hired, to provide within three (3) business days from the date my employment begins, proof of my identity and eligibility for employment in the United States.

I understand that this Application is not a contract for employment and that, if I am employed, both the Blood Bank and I each retain the right to terminate my employment for any or no reason with or without notice at any time. I also understand that no representative of the Blood Bank, other than its President/CEO or a duly authorized representative of the President/CEO, and then, only in writing, has the authority to enter into any agreement for employment for any specific time or to make any agreement contrary to the foregoing.

Applicant's Signature	Date