

EXPERIENCE List most recent experience first, then others of significance. Include military service.

Employer	Dates employed From: _____ To: _____	May we contact Yes <input type="radio"/> No <input type="radio"/>
Address (including city, state, zip)		Phone
Job Title	Duties	
Immediate supervisor	Reason for leaving	

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List other employers and dates of employment
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OTHER EXPERIENCE

Detail volunteer activities, community involvement, special projects, publications, honors, awards, or recognition you feel helps prepare you for this position.

Are you able to perform all the functions of the position for which you are applying? Yes No
If no, explain.

Hour Annual Desired Compensation (\$):

Are you related to anyone who is currently employed at the Toledo Museum of Art? Yes No

Name	Position
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Are you interested in (check all that apply)

Part time Temporary Full time Weekend Shift work

Schedule Availability

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

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Are there any restrictions on your availability for work?

How did you hear about this opening?

APPLICANT STATEMENT

REFERENCES List two references not related to you who can discuss your work and/or educational experience and achievements.

Name		Phone
Relationship	Email	Years Known
Name		Phone
Relationship	Email	Years Known

APPLICANT AGREEMENT and SIGNATURE

The Toledo Museum of Art provides equal opportunity for employment and promotion to all qualified employees and applicants. No person shall be discriminated against in employment on the basis of race, color, religion, gender, age, national origin, marital status, disability, sexual orientation, veteran status or any other status or condition protected by applicable federal or state statutes. The Museum is committed to maintaining an environment in which all employees are treated equitably and given the opportunity to achieve their full potential in the workplace.

I certify that the information contained in this application is correct to the best of my knowledge. I understand that false or misleading information is grounds for refusing to hire me or result in immediate termination if offered a position.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize the Museum or its agent to conduct any background or reference check, including but not limited to previous employment, education, criminal convictions, and credit records.

In consideration for my employment, I agree to abide by the policies and regulations of the Museum, which policies may be changed, withdrawn, added or interpreted at any time, at the Museum's sole option and without prior notice to me. I also acknowledge that should I be offered a position with the Museum, my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the Museum or myself.

I agree to undergo any requested physical examination or drug screening test.

I understand that any offer of employment will be contingent based upon reports satisfactory to the Museum.

Applicant signature

Date

