



NCASI Employment Application

National Council for Air and Stream Improvement, Inc.

THIS APPLICATION IS NOT INTENDED TO CREATE AN EMPLOYMENT CONTRACT. THE EMPLOYMENT RELATIONSHIP BETWEEN NCASI AND ALL EMPLOYEES WILL REMAIN AT-WILL.

If you need any accommodation to complete this application or during any stage of the selection process, please make your request to the Vice President, Business Affairs at 919/941-6410 or tgarren@ncasi.org. Note that “See Resume” is not an acceptable answer to any question on this form.

GENERAL INFORMATION				
Last Name	First Name	Middle Name	Social Security Number	
Present Address (Street, City, State, Zip Code)			Present Phone	
Position Desired	Work Location Restrictions (if any)	Date Available	Email Address	
Name & Location of High School, Trade School, College, or University	Major Course of Study	Degree Earned	Grade Point Average, A=4.0	
Honors, Activities, and Professional Societies (give positions held)				
Other Information (Community Activities, Hobbies, Interests)				
If hired, can you document that you are legally permitted to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				
EMPLOYMENT INFORMATION				
Work Experience (Name and Address of Employer)	Name and Title of Supervisor	Job Title or Description of Work	Dates Employed	
			From	To

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MILITARY				
Present Selective Service Status	Military Duty	Branch	From	To
Previous Service	Rank	Experience	From	To
Branch				
REFERENCES (Names, Addresses, Phone Numbers)				
1.				
2.				
3				
ACKNOWLEDGEMENT				
<p>The above information is true and complete to the best of my knowledge. I understand that any misrepresentation or omission on this application may preclude an offer of employment, or may result in my discharge from employment if I am already employed at the time the misrepresentation or omission is discovered.</p> <p>I understand that if the National Council for Air and Stream Improvement, Inc. (NCASI) hires me, my employment will be <i>at-will</i>, meaning that either I or NCASI can terminate it at any time for any reason.</p> <p>I authorize NCASI to make inquires to verify my suitability for employment, check the above references, and verify my work history. I hereby release NCASI and all individuals it contacts from any liability or damages incurred arising from, making, or responding to such inquiries.</p> <p>I agree to submit to a pre-employment drug screen as required by NCASI. I give permission for test results to be released to NCASI. I understand that positive test results, refusal to be tested, or any attempt to affect the test results or test sample will result in withdrawal of my application for employment, withdrawal of any provisional employment offer I have received from NCASI or termination of employment, depending on when the results are received. NCASI will not be held liable for any damages that arise from such screenings.</p> <p>Signed _____ Date _____</p> <p>NCASI is an equal opportunity employer. All qualified applicants receive equal consideration on the basis of merit regardless of race, sex, age, color, national origin, religion, ancestry, marital status, physical or mental disability which can be reasonably accommodated, status as a military veteran, or genetic history, consistent with applicable state and federal law, except where a <i>bona fide</i> occupational qualification applies.</p>				