



Employment Application

It is of the utmost importance that all information given on this application be accurate. It is our policy to verify information regarding an applicant's background, including but not limited to such items as dates of employment, salary progressions, and reasons for leaving present and/or previous employment.

Non-Smoking Facilities – Smoking is prohibited in all areas of the workplace occupied or used by The Da Vinci Discovery Center of Science & Technology associates.

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The Da Vinci Discovery Center of Science and Technology, Inc. (or "Da Vinci Science Center") is an independent nonprofit organization with IRS 501(c)(3) status. Its Federal Tax Identification Number is 23-2824084. The official registration and financial information of the Da Vinci Science Center may be obtained from the Pennsylvania Department of State by calling toll-free, within Pennsylvania, 1.800.732.0999. Registration does not imply endorsement. The Da Vinci Science Center also is authorized or registered to solicit contributions in the states of California, Florida, New Jersey, and New York. Additional information about these registrations is available on the web at www.davincisciencecenter.org/support.



Please Print or Type All Information

General

Name _____
Last First Middle Initial

Present Address _____
House Number and Street City State Zip

Previous Address _____
House Number and Street City State Zip

Home Telephone Number _____ Mobile Telephone Number _____

Business Telephone Number _____ Email Address _____

I am a U.S. Citizen or National of the U.S., an alien lawfully working for permanent residence, or an alien authorized to work in the U.S. for The Da Vinci Discovery Center of Science & Technology ___ Yes ___ No

Note: Upon request, prior to commencement of employment, you must provide documentation that establishes your identity and authorization to work in the United States.

Are you under the age of 18? ___ Yes ___ No (If your answer is yes, you must supply working papers if hired)

Are you related to anyone currently or previously employed by our company? ___ Yes ___ No
If yes, state name and relationship? _____

Position

Type of employment desired: ___ Full-time ___ Part-time ___ Temporary ___ Summer

Position Applied For _____ Date Available _____ Salary Requirement _____

Have you ever applied or interviewed for a position with The Da Vinci Discovery Center of Science & Technology?
___ Yes ___ No If yes: Date _____ Position _____

Have you ever been employed by The Da Vinci Discovery Center of Science & Technology? ___
___ Yes ___ No If yes: Date _____ Position _____

Reason for leaving _____

Referred by: ___ Associate / ___ DSC Website / ___ Other Website / Agency: _____

Name of associate who referred you _____

Background

In connection to a criminal offense, have you ever been convicted, pled guilty, served probation, had adjudication deferred, or participated in a pretrial diversion or other program to avoid prosecution? ___ Yes ___ No

If you answered "yes" to the above question, please explain (use additional paper if necessary).

Note: The disclosure of a prior criminal justice system involvement will not necessarily affect your employment opportunity.

If the position requires driving do you have a valid driver's license? ___ Yes ___ No

Has your driver's license ever been suspended or revoked? ___ Yes ___ No
If you answered "yes" to this question, please explain (use additional paper if necessary).

Current Driver's License: State _____ License# _____ Class _____

Employment History

Present Employer _____

Address _____
Street City State Zip

Employed from _____ to _____ Job Title _____
Month/year Month/year

Start Salary _____ Current Salary _____ Other Compensation _____

Major Duties _____

Why do you want to change jobs? _____

Supervisor's Name and Telephone Number _____ (_____) _____
Area Code

May we contact your employer? Yes No If no, please explain why _____

Prior Employer _____

Address _____
Street City State Zip

Employed from _____ to _____ Job Title _____
Month/year Month/year

Salary Start _____ Salary Finish _____ Other Compensation _____

Major Duties _____

Supervisor's Name and Telephone Number _____ (_____) _____
Area Code

Reason for Leaving _____

Prior Employer _____

Address _____
Street City State Zip

Employed from _____ to _____ Job Title _____
Month/year Month/year

Salary Start _____ Salary Finish _____ Other Compensation _____

Major Duties _____

Supervisor's Name and Telephone Number _____ (_____) _____
Area Code

Reason for Leaving _____

Professional References			
Name	Relationship	Company	Telephone Number

Education			
Name	Address	Course/Degree	# of Years Completed
High School			
Business or Vocational School			
College			
Graduate or Other School			

Skills Summary

Describe any other experience, skills or qualifications that you feel would help you perform the job for which you are applying.

Applicant Statement Please Read Carefully

Unless otherwise clear from the context, the use in the Applicant Statement of "the Company" refers to The Da Vinci Discovery Center of Science & Technology.

In completing and signing this application for employment, and any supplements to this application, I understand that any misrepresentation or omission of facts is cause for cancellation of this application or separation from the Company's service if I am employed. I agree that the Company shall not be liable in any respect if my employment is terminated because of the falsity of statements made by me on this application.

I understand further that information concerning my past record may be sought from my previous employers and other sources, and I hereby release from all liability or damages those individuals, corporations, or organizations providing such information. I understand any such information provided shall become the exclusive property of the Company. I understand that any offer is conditional upon the results of such background checks.

Moreover, I understand that the Company has a smoke-free policy and that smoking is permitted only in specified outdoor locations. I agree to comply with all aspects of this policy if employed by the Company.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the Company and me or to provide me with any other benefit. I further understand that nothing contained in any Company handbook, manual, rule or regulation, practice, policy, etc. creates an employment contract, express or implied, between the Company and me. I agree that if I am employed by the Company, I shall be an employee-at-will, unless different terms are agreed to in writing by an officer of the Company designated by it for that purpose. I also agree that if I am employed as an employee-at-will, I have the right to terminate my employment without cause and without notice as of any time, and that the Company also has the same right.

If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the U.S.

The facts set forth in this application are true and correct. I understand that if employed, any false or misleading statements, omissions, or failure to fully answer any questions may result in my dismissal, regardless of when such information is discovered. This certifies that I have received the above understand and agree to it, and that all entries made by me are true and correct

Signature of Applicant: _____ Date: _____