CCCI APPLICATION OF EMPLOYMENT

It is the policy of CCCI to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap or veteran status.

Note: Please type or print your answers. If you print, please do so in blue or black ink and write neatly.

An illegible application may preclude you from consideration.

POSITION APPLYING	FOR					
LOCATION (check box)	: GCCI/CCCI-C	Gov, Dulles, V	Α 🗆	CCCI-Central, St. Louis, MO		
PERSONAL INFORMA	ATION					
			Last Name			
Current Address: Street and Apt. #	City	Stat	e	Zip Code		
Permanent Address (if o	different from above):					
Street and Apt. #	City	Stat	e	Zip Code		
Telephone:	E-mail:					
Social Security #:			Cto	 te:		
I am an U.S. Citizen or	otherwise authorized	to work in the	Unite	d States on an unrestricted basis:		
☐ Yes ☐ No	otilei wise autilolized	to work in the	Office	d States on an unlestricted basis.		
If applicable, please list	your visa type, visa #	and expiratio	n:			
Have you ever been con If you answered yes, ple	•	□ Yes	□ N	0		
ii you ariswered yes, pie	еаѕе ехріаіі і.					
Have you ever served in	n the U.S. Military?	□ Yes		0		
If ves inlease provide th	ne following informatio	nn·				
			ne of s	separation:		
				·		
Special Honors:						
If yes, please provide the Branch of Service:	ne following informatio	on: Rank at tim	ne of s	separation:		
opeciai noilors						

Last Name:	F	First Name:		Middle Initial:			
EMPLOYMENT HIST	TORY						
Present or Most Rec	ent Employer						
Employer:	Address	:					
Your Position:			Salary:				
Duties:							
Dates of Employment	:		to				
Supervisor:				May we contact?	□ Yes	□ No	
	Name	Title					
Reasons for Leaving _							
Prior Employer							
Your Position:			-				
Duties: Dates of Employment							
Supervisor:				May we contact?	□ res		
Reasons for Leaving	Name	Title					
Prior Employer							
	Address	:					
Your Position:							
Duties:							
Dates of Employment							
Supervisor:				May we contact?	□ Yes	□ No	
	Name	Title		-			
Reasons for Leaving _							

Last Name:	First Name:		Middle Initial:
EDUCATION			
☐ High School (Name and	d Address)		
Did you graduate? ☐ Ye	es No Attended from	to	
	, did you receive your GED? □ Yerds:		
□ Technical or Vocation	onal School (Name and Address)		
	es No Attended from		
	ds:		
☐ Junior College (Name	e and Address)		
	es No Attended from		
	ds:		
□ College or University	y (Name and Address)		
Name and Address			
Did you graduate? ☐ Ye	es No Attended from	to	
Special honors or awar	rds:		

Position Specifications Position Applying For: _____ How did you hear about this job? _____ What hours are you willing to work? ⊓ Yes Would you be able to work weekends? □ No Are you willing to travel for the job? ☐ Yes □ No When would you would you be able to start? _____ Desired Salary: _____ annual Desired Rate: _____ per hour **SKILLS** Please describe any skills you have in the following areas: Computer: _____ Languages Spoken (other than English): ______ Other: I hereby certify that my answers and assertions set forth in this application are true and complete to the best of my knowledge. If I am employed, I understand that any false statements on this application shall be considered sufficient cause for my dismissal. I hereby authorize CCCI, CCCI-Central and CCCI-Gov (herein forward both referred to as "company") to investigate any aspect of my prior educational and employment history. Furthermore I understand that if I am hired, employment with this company is "at will," which means that either the company or I can terminate my employment for any reason not prohibited by state or federal law. Signature: _____ Date _____

POSITION INFORMATION