



Powered by Salesmanship Club since 1920

NOTICE TO APPLICANTS

Momentous Institute maintains a "zero tolerance" policy for child abuse.

Criminal background checks and other federal or state screenings for child abuse will be conducted.

Applicant's Name: _____

Date of application: _____

Momentous Institute (Momentous) maintains a policy of non-discrimination for all employees and applicants in every facet of the organization's operations. Momentous hires, trains, and promotes all qualified employees without discrimination on the basis of race, color, sex, religion, national origin, age, military status, disability, genetic information, gender identity, or sexual orientation.

Receipt of this application does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

Instructions: Please print and complete all questions. Include any supplemental information that you feel would be helpful in our consideration of your qualifications. If you need additional space for your responses below, attach additional sheets.

Applicant Identification

Name: _____
Last First Middle

Address: _____
Street

City State Zip Code

How did you learn about Momentous?

Phone: (____) _____ (____) _____
Home Cell

Email: _____

Are you over 18 years of age? ☐ Yes ☐ No

If hired, can you furnish proof that you are either a U.S. Citizen, or otherwise legally permitted to work in the United States? ☐ Yes ☐ No

Type of Employment Desired

Position sought: _____ Date you could begin working: _____

Applying for: ☐ Full Time ☐ Part-Time ☐ Seasonal ☐ Temporary

Days/Hours available to work: _____

Education:

Name, City and State of High School: _____ Did you graduate?
☐ Yes ☐ No

Name and Address of College or Trade Schools:	From (Mo/Yr):	To (Mo/Yr):	Academic Majors:	Degree:	(Mo./Yr.):
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Extracurricular Activities, Scholarships and Skills: List those extracurricular activities, scholarships and skills that you believe are related to the position for which you are applying. (You may exclude those that may suggest race, religious creed, sex, marital status, age, color, national origin, or physical handicap.)

Other Professional Training Experience (if applicable): Specify location, date and nature of training.

Certifications and/or Licensures Earned (in applicable): Specify type and states where valid.

Comments and Accomplishments: Explain below, or on another sheet, your primary area of specialization. Note any other details which should be considered in reviewing your qualifications, including professional affiliations, honors and awards, theses, publications, patents, etc. (You may exclude professional affiliations, which may suggest the race, religious creed, sex, marital status, age, color, national origin, or physical handicap of its members).

Instructions: Please print and list every position that you have held for the past ten (10) years starting with your present or most recent position. (Account for all periods of unemployment.) If you require additional space to detail your employment history, please use a separate sheet of paper.

Employment Background: Present or most recent position.

Employer: _____

Address: _____
Street City State Zip Code

Name and Title of Supervisor: _____

Your position and duties: _____

May we contact your present employer for a reference?
☐ Yes ☐ No

Phone: () _____

Employed From (Mo/Yr): _____

Employed To (Mo/Yr): _____

Starting Base Pay: _____

Ending Base Pay: _____

Reason for leaving: _____

Employment Background: Previous position.

Employer: _____

Address: _____
Street City State Zip Code

Name and Title of Supervisor: _____

Your position and duties: _____

Phone: () _____

Employed From (Mo/Yr): _____

Employed To (Mo/Yr): _____

Starting Base Pay: _____

Ending Base Pay: _____

Reason for leaving: _____

Employment Background: Previous position.

Employer: _____

Address: _____
Street City State Zip Code

Name and Title of Supervisor: _____

Your position and duties: _____

Phone: () _____

Employed From (Mo/Yr): _____

Employed To (Mo/Yr): _____

Starting Base Pay: _____

Ending Base Pay: _____

Reason for leaving: _____

Employment Background: Previous position.

Employer: _____

Address: _____
Street City State Zip Code

Name and Title of Supervisor: _____

Your position and duties: _____

Phone: () _____

Employed From (Mo/Yr): _____

Employed To (Mo/Yr): _____

Starting Base Pay: _____

Ending Base Pay: _____

Reason for leaving: _____

Professional or Character References: List individuals who can attest to your professional abilities, work accomplishments and/or personal character. (Do not include relatives or close friends unless you worked directly for them and/or they have a unique familiarity with your work abilities.)

Name: E-mail Address: Daytime Phone Numbers: Relationship to you:

Additional Information:

Have you ever been employed by Momentous?

☐ No☐ Yes

If yes, give dates below:

Do you have a relative employed by Momentous, or are you related to an employee or member of the Salesmanship Club of Dallas (SCD)?

☐ No☐ Yes

If yes, give name(s) and relationship below:

Have you ever been convicted of a felony (using your current name or under any other name)?

☐ No☐ Yes

Do you currently have any pending criminal charges (using your current name or under any other name)?

☐ No☐ Yes

If yes to either or both of the above, explain below (include full name under which you were charged/convicted):

Do you have any physical limitations, which may limit your ability to perform the job for which you are applying, with or without reasonable accommodation?

Yes ☐ No ☐Do you speak any foreign languages fluently?
If yes, list language(s).Yes ☐ No ☐Have you ever been fired, or asked to resign from a job? ☐ Yes ☐ No

If yes, explain

PLEASE READ CAREFULLY AND SIGN BELOW - I understand and agree that:

- A thorough pre-employment screening process will be conducted and any offer of employment, if made, will be contingent upon a satisfactory screening which could include a Criminal Background Check, Reference Checks, Employment Verification, Drug Screening (for positions involving the transportation of passengers as part of one's duties), and other assessment and screening tools.
- This application is not a contract and that acceptance of employment, if made, is not a contract of employment for a specified term. I understand and agree that I may resign my employment with Momentous at any time for any reason, and that my employment may be terminated at the will of Momentous at any time for any reason. I also understand and agree that any handbooks, manuals, policies, and procedures maintained by Momentous are not contractual in nature and may be amended or abolished at the sole discretion of SCD at any time.
- Should I become an employee of Momentous, I will adhere to Momentous Policies and Standards of Conduct, will report all suspected violations of law related thereto, and will conduct the organization's business in a strictly ethical and legal manner.
- Pursuant to the Immigration Reform and Control Act, Momentous will employ only those individuals who are eligible to work in the United States. Accordingly, upon hiring, all new employees will be required to demonstrate their eligibility to work in the United States. Failure to do so will result in termination or revocation of the offer of employment.

I certify that I have read, understand and will adhere to the aforementioned statements. I also certify that the information furnished in this application and any supporting documents is true and complete to the best of my knowledge and belief and I understand that any misrepresentation or omission of material fact on this or any other record submitted pertinent to employment may result in immediate dismissal.

Signature of Applicant: _____

Date: _____

Office Use Only

Application reviewed by: _____

Date: _____

Application forwarded for further consideration to: _____

Date: _____

Notes: _____

**SUPERVISOR,
PLEASE COMPLETE:**

Program: _____

Supervisor's Name: _____

Applicant type (check one):

- ☐ Staff, permanent
☐ Staff, sub/temp/PRN
☐ Trainee/practicum/volunteer

VERIFYI
**Background Verification
Release Form**

AGENCY INFORMATION

Date	Agency Name Momentous Institute/ Salesmanship Club of Dallas		
Contact Name Maria Maldonado, Human Resources Manager			
Agency's Main Phone Number 214-915-4742		Agency's Fax Number 214-946-7140	

APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)			Maiden or Other Name(s) Used	
Current Address				
City		State	Zip Code	County
Social Security Number	Date of Birth	Driver's License Number		State Issued
Position Applied For				
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Race <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VERIFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

Applicant's Signature

Date

Applicant's Printed Name

Parent/Guardian's Signature
(if under 18 years of age)

Office
Use Only

Date Submitted: _____ Initials _____
Results date: _____ Initials _____

Date Submitted: _____ Initials _____
Results date: _____ Initials _____