



Literacy for Adults in Brevard

308 Forrest Ave, Cocoa, FL 32922 or P.O. Box 561201 321-301-4496

LiteracyforAdultsinBrevard@gmail.com

CONTRACTOR POSITION

Application information

Full name:	_____	Date:	_____
	<i>Last First M.I.</i>		
Address:	_____	Phone:	_____
	<i>Street address Apt/Unit #</i>		
	_____	Email:	_____
	<i>City State Zip Code</i>		
Date Available:	_____	_____	\$ _____
Position applied for:	Administrative Coordinator Contractor		

Are you a citizen of the United States?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If no, are you authorized to work in the U.S.?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Have you ever been convicted of a felony?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, explain? _____

Education

High school: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

References

Please list three professional references.

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Email: _____

Earlier Employment

Company : _____

Phone: _____

Address: _____

Supervisor: _____

Job title: _____

From: _____ To: _____

Responsibilities: _____

May we contact your earlier supervisor for a reference?

Yes No

Company : _____

Phone: _____

Address: _____

Supervisor: _____

Job title: _____

From: _____ To: _____

Responsibilities: _____

May we contact your earlier supervisor for a reference?

Yes No

Company : _____

Phone: _____

Address: _____

Supervisor: _____

Job title: _____

From: _____ To: _____

Responsibilities: _____

May we contact your earlier supervisor for a reference?

Yes No

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that false or misleading statements in my application or interview may result in my release.

Signature: _____

Date: _____

Please return completed application to Literacyforadultsinbrevard@gmail.com or drop off at Cocoa Library in an envelope marked Literacy for Adults in Brevard (LAB) at 308 Forrest Ave, Cocoa, FL 32922