

Phone:			
Email:			

Contemporary Arts Museum Houston Employment Application

	Position applied for: Date:					
Street Address City State Zip Are there any days, shifts or hours you will not work? If yes, please explain:	ersonal Data:					
Are there any days, shifts or hours you will not work? If yes, please explain:	ıst Name	First	Middle	Social Secu	ırity #	
	reet Address		City	State	Zip	
	Are there any days, shifts or hours you will not work? If yes, please explain:					
When will you be able to start work?	hen will you be able to start work? _					
How did you learn about the Contemporary Arts Museum Houston?	ow did you learn about the Contemp	orary Arts Museum	n Houston?			
If referral, who were you referred by?	referral, who were you referred by?					
Have you ever applied or worked here before? Yes □ No □ If yes, provide dates:	ave you ever applied or worked here	before? Yes □ No □	☐ If yes, provide dates:			
Are you legally authorized to work in the United States? Yes \square No \square	re you legally authorized to work in t	he United States? Y	∕es □ No □			
Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new himust present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.	erification "Form I-9" be completed for out of the completed for out of the employer documental or the	every new hire and the ion establishing his/l	at within 3 business days of be	ginning work ev	very new hire	

Education:

Name, City and State of Education Institution	Graduated? If yes, degree received	Major, Minor and GPA
High School		
College or University		
College or University		
Technical/GED		

Employment History:					
Company Name	Tel #				
Address Dates Er			Dates Employed From		
Name of Supervisor	May we contact? Yes □ No □	Rate of Pay	Start	Last	
State job titles and describe job dut	ies				
Reason for leaving					
Company Name		Tel #			
Address		Dates Employed	From	То	
Name of Supervisor	May we contact? Yes □ No □	Rate of Pay	Start	Last	
State job titles and describe job dut	ies				
Reason for leaving					
Company Name	Tel #				
Address		Dates Employed	From	То	
Name of Supervisor	May we contact? Yes \square No \square	Rate of Pay	Start	Last	
State job titles and describe job dut	ies				
Reason for leaving					

Please explain any gaps in your employment history:
Have you ever been discharged or forced to resign? Yes \square No \square If yes, explain:
Did you receive any discipline in the last 12 months of active employment? Yes □ No □ If yes, please explain:
Have you taken any illegal drugs in the last 30 days?
Have you ever been the defendant in a civil action for an intentional commission of a wrongful act? Yes \square No \square If yes, include the nature of the intentional commission and the disposition of the action:
Criminal Record Information: You must answer all four questions below. When answering the following questions, you may exclude any records expunged, annulled, sealed, discharged, dismissed, erased under first-offender law or otherwise eradicated by statute or court order. You may also exclude a first conviction for any of the following misdemeanors: drunkenness, speeding, or minor traffic violations. A criminal conviction will not necessarily be a bar to employment but will be considered in relation to specific job requirements.
1. Have you been convicted of a felony within the last seven years? Yes □ No □ Date of conviction:
2. Have you been convicted within the last seven years of misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving the use of a weapon for burglary, robbery, breaking and
entering or theft, or physical assault or other violent crime? Yes \square No \square
3. Have you been convicted of or completed a period of incarceration within the past five years for any misdemeanor? Yes \square No \square If the answer to the above question is "yes," please state whether you were convicted more than five years ago for any offense? Yes \square No \square
4. A criminal conviction will not necessarily bar employment. To help us evaluate your applicataion, please describe your criminal conviction(s) including penalty(ies) imposed, listing the nature of your offense(s) and your rehabilitation since the conviction.

Disclosures:

CAMH fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, disability, or any other basis prohibited by federal, state, or local law. In accordance with requirements of the Americans With Disabilities Act, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As Equal Opportunity Employers, we intend to comply fully with applicable federal and state employment laws and the information requested on this application will only be used for purposes consistent with those laws. Applications are only accepted for positions currently available and will only be considered for 30 days from today's date or until the position applied for is filled, whichever occurs first.

I hereby certify that I have read and fully understand this application. Prior to signing below, I had the opportunity to ask CAMH about this application and clarify any questions I might have had concerning this application form.

I hereby certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations or omissions of facts or incomplete answers in any application document may disqualify me from further consideration of employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice. I consent to and authorize CAMH to contact my former employers, references and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give CAMH (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

I expressly agree and understand that, if employed, my employment is not for a specific term, is based on mutual consent and may be terminated by me or my employer with or without notice or cause at any time. I further understand that no oral promise, employer policy, custom, business practice, or other procedure (including employment policy, handbook or any personnel manuals) constitute an employment contract or modification of the at-will employment relationship between me and CAMH. I also understand that this aspect of my employment may not change absent an individual written agreement signed by both and the Director of CAMH.

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; submit to a background investigation, or take a pre-employment drug test. If I am offered employment or start work before any required test in completed, my employment is contingent on a satisfactory result on all required tests. I authorize CAMH to release the results of background checks (if any) and my pre-employment drug/alcohol test (if any), any information on this application and any relevant information about me to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from CAMH at the conclusion of this 30 day period, it is my responsibility to complete a new application if I still wish to be considered for employment.

Certification for all applications – Please	e read carefully
This certifies that this application was complete	ed by me, and that all entries on it and information in it are true
and complete to the best of my knowledge.	
Signature	Date

Please send completed form to: Contemporary Arts Museum Houston 5216 Montrose Blvd. Houston, TX 77006