

# EMPLOYMENT APPLICATION

## **Employer Information**

Employer: *Madam Clutterbucket's Neurodiverse Universe*  
Address: *21 Battery Park Ave Suite #101*  
City/State/ZIP: *Asheville, North Carolina 28801*  
Telephone: *828.552.3013*

It is the policy of Madam Clutterbucket's Neurodiverse Universe to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

## **1. Applicant Information**

Applicant Full Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_  
\_\_\_\_\_  
Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_  
Driver's License (State/Number): \_\_\_\_\_

## **2. Emergency Contact**

Who should be contacted if you are involved in an emergency?  
Contact Name: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

## **3. Job Position Desired:**

\_\_\_\_\_  
Full or Part Time? \_\_\_\_\_  
Salary Desired: \$ \_\_\_\_\_ per \_\_\_\_\_

4. Who referred you to our company? \_\_\_\_\_  
5. Do you have any friends or relatives who work here? If yes, please list here:  
\_\_\_\_\_

6. Are you at least 18 years old? \_\_\_\_\_ Yes \_\_\_\_\_ No
7. How will you get to and from work? \_\_\_\_\_
8. Are you willing to work any shift, including nights and weekends? \_\_\_\_\_ Yes \_\_\_\_\_  
 No If no, please state any limitations:  
 \_\_\_\_\_
9. If you are offered employment, when would you be available to begin work?  
 \_\_\_\_\_
10. If hired, are you able to submit proof that you are legally eligible for  
 employment in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

**11. Applicant Employment History**

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment.

Employer Name: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Job Duties: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 Dates of Employment (Month/Year): \_\_\_\_\_

Employer Name: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Job Duties: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 Dates of Employment (Month/Year): \_\_\_\_\_

Employer Name: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Job Duties: \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 Dates of Employment (Month/Year): \_\_\_\_\_

**12. Education and Training**

High School/GED Name and Address:

Did you receive a degree? \_\_\_\_\_ Yes \_\_\_\_\_ No

College/University Name and Address

Did you receive a degree? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, degree(s) received: \_\_\_\_\_

**13. Skills/ Talents/ Training:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**14. References**

List any two non-relatives who would be willing to provide a reference for you.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**15. Why do you want to work at Madam Clutterbucket's Neurodiverse Universe?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**16. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:**

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## CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Madam Clutterbucket's Neurodiverse Universe to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to communicate information fully and freely regarding my previous employment, attendance, and grades. I authorize those persons designated as references to communicate information fully and freely regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Owner, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Madam Clutterbucket's Neurodiverse Universe, except in a specific written contract of employment signed on behalf of the organization by its Owner, has the power to alter or vary the voluntary nature of the employment relationship.

*I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.*

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APPLICANT SIGNATURE

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DATE