



APPLICATION FOR EMPLOYMENT
An Equal Opportunity Employer and Drug and Alcohol-Free Workplace

GENERAL INSTRUCTIONS

Type or print all answers clearly. Answer all questions fully and accurately, sign, date, and return the application to CEDA Saipan Office for processing. You are encouraged to provide a resume with this application. Applicants must submit an original police clearance; a copy of the diploma of the highest education level achieved.

1. POSITION APPLIED FOR:

Announcement No: _____

Position: _____

2. APPLICANT:

Last: _____

First: _____

Middle: _____

3. CONTACT INFORMATION:

Home Phone: _____

Cell Phone: _____

Email: _____

4. DO YOU HAVE ANY IMMEDIATE RELATIVE EMPLOYED HERE AT CEDA?

Yes _____ No _____

Name: _____

5. CURRENT MAILING ADDRESS:

6. CURRENT RESIDENCE AND STREET:

7. ARE YOU ABLE TO WORK IN THE U.S.?

Yes _____ No _____

8. Do you already have an acceptable set of required documents to complete form I-9 CNMI to verify your authorization to work in the U.S. and specifically the Northern Mariana Islands?

Yes _____ No _____

9. REASONABLE ACCOMMODATION:

Do you agree that you will inform CEDA about how it could reasonably accommodate any special need you may have now or in the future?

Yes _____ No _____

10. ARE YOU 18 YEARS OLD?

Yes _____ No _____

11. SELECTIVE SERVICE:

If you are a male between the ages of 18 and 26 and is required to register with the Selective Service, you agree to ensure you are registered with the Selective Service before your first workday, if offered a position?

Yes _____ No _____

Or Not Applicable _____

12. START DATE, IF SELECTED:

When are you available?

13. HAVE YOU EVER:

A. In the last five years, have you been terminated for any reason?

Yes	No	
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B. In the last five years, have you quit a job to avoid termination?

Yes		No	
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C. Been convicted of any criminal offences and or traffic violations?

Yes		No	
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If you answered yes, to any of the questions in this section, please explain.

14. SPECIAL QUALIFICATIONS:

Special qualifications, certifications, licenses, etc. related to this job you are applying for or interested in:

15. LANGUAGE SKILL(S):

List the Languages you know	read	speak	write	understand

16. EDUCATION AND TRAINING

Place and "X" next to all that is appropriate. Then be sure to provide official transcripts or show original documents upon application submission.

☐	No high school
☐	High school diploma or equivalent
☐	Some vocation training
☐	Vocational "diploma"

☐	Some College, credit hours completed _____
☐	Associate degree in _____
☐	Bachelor's degree in _____
☐	Some Graduate school
☐	Master's degree in _____
☐	Doctorate degree in _____
☐	Licensed professional as a(n) _____
☐	Other, please specify _____

17. PREVIOUS POSITIONS:

This section is to be completed even though a resume is attached. Start with the latest employment and continue with earlier employment and or employment most applicable for the position applying for.

Latest company:

Dates Employed: From _____ To _____
Address: _____
Latest Position: _____
Latest Salary: _____ per hour
Starting Position: _____
Starting Salary: _____ per hour
Name and Contact No. of Immediate Supervisor: _____ / _____
Reason for Leaving Company: _____
Description of Work: _____

Second company:

Dates Employed: From _____ To _____
Address: _____
Latest Position: _____
Latest Salary: _____ per hour
Starting Position: _____
Starting Salary: _____ per hour

Name and Contact No. of Immediate Supervisor:

_____ / _____

Reason for Leaving Company: _____

Description of Work: _____

Third company:

Dates Employed: From _____ To _____

Address: _____

Latest Position: _____

Latest Salary: _____ per hour

Starting Position: _____

Starting Salary: _____ per hour

Name and Contact No. of Immediate Supervisor:

_____ / _____

Reason for Leaving Company: _____

Description of Work: _____

18. REFERENCE:

Please provide at least three persons (not related to you) who have worked with you or who have knowledge about your job qualifications.

A. Name: _____

Contact No.: _____

Email Address: _____

Occupation: _____

B. Name: _____

Contact No.: _____

Email Address: _____

Occupation: _____

C. Name: _____

Contact No.: _____

Email Address: _____

Occupation: _____

19. APPLICANT'S CERTIFICATION AND AUTHORIZATION:

I hereby affirm that the information provided on this application (and accompanying resume if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me for further consideration for employment and may be considered justification for dismissal (from employment) if discovered at a later date. All statements made in this application are subject to investigation, including a check of court records and contact with former employers.

I hereby agree to submit to any lawful drug, integrity, or skill testing that may be required as a condition of employment, and understand that unless otherwise prohibited by law, refusal to submit to drug testing during the course of my employment may result in discharge pursuant to the CNMI Alcohol and Drug Free Workplace program.

CERTIFICATION

I certify that I have read and understand the foregoing paragraph. I further certify that all the answers and statements made in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. My signature below authorizes the release of court and employment documents and references upon request of the Commonwealth Development Economic Authority or the Head of the Department or activity considering my application.

PRINT NAME:

SIGNATURE: _____

DATE: _____

**COMMONWEALTH ECONOMIC DEVELOPMENT
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