

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:	8.	Do you already have an acceptable set of	
	Announcement No:		required documents to complete form I-9 CNMI to verify your authorization to work in the U.S.	
	Position:		and specifically the Northern Mariana Islands?	
2.	APPLICANT:		Yes No	
	Last:	9.	REASONABLE ACCOMMODATION:	
	First:	5.	Do you agree that you will inform CEDA about	
	Middle:		how it could reasonably accommodate any special need you may have now or in the future?	
3.	CONTACT INFORMATION:		Yes No	
	Home Phone:			
	Cell Phone:	10.	ARE YOU 18 YEARS OLD?	
	Email:		Yes No	
4.	DO YOU HAVE ANY IMMEDIAE RELATIVE EMPLOYED HERE AT CEDA?	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	
	Yes No	-		
	Name:		with the Selective Service before your first workday, if offered a position?	
5.	CURRENT MAILING ADDRESS:		Yes No	
			Or Not Applicable	
		12.	START DATE, IF SELECTED:	
6.	CURRENT RESIDENCE AND STREET:		When are you available?	
		13.	HAVE YOU EVER:	
			A. In the last five years, have you been	
7.	ARE YOU ABLE TO WORK IN THE U.S.?		terminated for any reason?	
	Yes No		Yes No	
			<u>.</u>	

B. In the last five years, have you quit a job to avoid termination?

Yes		No	
Been convio	cted of any	criminal of	fences

C. Been convicted of any criminal offences and or traffic violations?

Yes	lo
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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

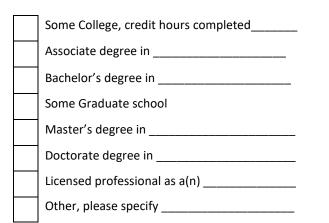
Place and "X" next to all that is appropriate. Then be sure to provide official transcripts or show original documents upon application submission.

No high school

High school diploma or equivalent

Some vocation training

Vocational "diploma"



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:	
	per hour
Starting Position:	
Starting Salary:	per hour
Name and Contac	t No. of Immediate Supervisor:
	//
Reason for Leavin	g Company:
Description of Wo	ork:

Second company:

Dates Employed:	From	То	
Address:			
Latest Position:			
Latest Salary:			_per hour
Starting Position:			
Starting Salary:			_per hour

Applicant Initials and Date: CEDA Personnel Form: 07 FINAL: 01/31/2020



Name and Contact No.	of Immediate	Supervisor:
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_____/ ____/ Reason for Leaving Company:______/

Description of Work:

Third company:

From To
per hour
per hour
t 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 AUTHORITY

2390 Beach Road, Oleai, unit 205 P.O. Box 502149 Saipan, MP 96950 Tel: (670) 234-6245 / 6293 Fax: (670) 235-7147 Website: www.developcnmi.com

> Applicant Initials and Date: CEDA Personnel Form: 07 FINAL: 01/31/2020

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