

# Al-Ikhlas Training Academy

## Employment Application

(Al-Ikhlas requires that all employees be fingerprinted.)

**NON-DISCRIMINATION POLICY:** Al-Ikhlas Training Academy does not discriminate on the basis of race, religion, national or ethnic origin, age, gender, marital status or disability. All qualified applicants will be considered for available job openings, and final decisions will be based on job related factors.

### APPLICANT INFORMATION (please print or type):

Name: \_\_\_\_\_  
Last name First name Middle

Address \_\_\_\_\_  
Street City State Zip

Home phone ( ) \_\_\_\_\_ Business phone ( ) \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Are you 18 years or older? Yes \_\_\_ No \_\_\_

Ethnicity \_\_\_\_\_ Religion \_\_\_\_\_ Languages Spoken \_\_\_\_\_

Are you legally eligible to work in the U.S.? Yes \_\_\_ No \_\_\_ (If hired, you will be asked to produce documentation of your right to work in the U.S..)

Have you ever been convicted of a felony or misdemeanor, including minor traffic offenses that would be considered minor misdemeanors? Yes \_\_\_ No \_\_\_ (Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature, date, circumstances, and relevance of the offense for the position to which you are applying will be taken into consideration. **False or incomplete information will be grounds for termination. Your employment is contingent upon satisfactory completion of a background check that is required of all employees.**)

If yes, please state the nature of the crime(s), when and where convicted, and disposition of the case(s): \_\_\_\_\_

### POSITION FOR WHICH YOU ARE APPLYING:

Position title \_\_\_\_\_

Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Date you can start \_\_\_\_\_

Are you employed now? Yes \_\_\_ No \_\_\_ If yes, may we contact your present employer? Yes \_\_\_ No \_\_\_

### EDUCATIONAL BACKGROUND:

Teaching Certificate: Number \_\_\_\_\_ Subject \_\_\_\_\_ State(s) granting \_\_\_\_\_

High School/Colleges/Universities: (Include city and state)	Degree or Certificate Earned	Major and Minor	Date Completed

**WORK HISTORY:**

---

Company/School Name	Address	Phone
---------------------	---------	-------

---

Dates Employed	Full Time?	Position/Title
----------------	------------	----------------

---

Reason for Leaving \_\_\_\_\_

---

Company/School Name	Address	Phone
---------------------	---------	-------

---

Dates Employed	Full Time?	Position/Title
----------------	------------	----------------

---

Reason for Leaving \_\_\_\_\_

---

Company/School Name	Address	Phone
---------------------	---------	-------

---

Dates Employed	Full Time?	Position/Title
----------------	------------	----------------

---

Reason for Leaving \_\_\_\_\_

**RELATED SKILLS AND EXPERIENCE:**

**Teachers:** Interdisciplinary teaching, or experience teaching in integrated programs. **For All:** Special skills, training and experience:

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

Sports coached: \_\_\_\_\_

Activities sponsored: \_\_\_\_\_

Computer literacy (*list equipment and software that you are experienced in using*): \_\_\_\_\_

Community service: \_\_\_\_\_

Currently certified in First Aid? Yes \_\_\_ No \_\_\_    Currently certified in CPR? Yes \_\_\_ No \_\_\_

Other experience and skills \_\_\_\_\_

**Americans with Disabilities Act:** Can you perform the essential duties for the position for which you have applied, with or without reasonable accommodations? If some accommodations needed, please explain. **Use space below.**

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

**REFERENCES:** (especially managers and supervisors who have firsthand knowledge of your character, intellectual ability, teaching skills, and kinds of experience listed above)

Name \_\_\_\_\_ Position \_\_\_\_\_

School/Company \_\_\_\_\_

Address \_\_\_\_\_

Work phone ( ) \_\_\_\_\_ Home phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

School/Company \_\_\_\_\_

Address \_\_\_\_\_

Work phone ( ) \_\_\_\_\_ Home phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

School/Company \_\_\_\_\_

Address \_\_\_\_\_

Work phone ( ) \_\_\_\_\_ Home phone ( ) \_\_\_\_\_ Email \_\_\_\_\_

*I hereby certify that the information provided on this application is truthful and accurate and that it fairly represents my work history. I understand that omissions or falsehoods on this application may prevent my application from being reviewed. I authorize Al-Ikhlās Training Academy to obtain information about my criminal records, if any, from the Michigan State Police or other law enforcement agency. I also authorize the school to obtain information from my prior employers and schools, to investigate information provided in my application, and to contact others listed or not listed on my employment application about my work history, education, qualification, or fitness for employment. I release the school and all persons providing information from any liability for obtaining and offering that information, regardless of outcomes.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

If mailing, please send the completed application, together with attachments, to:

**Al-Ikhlās Training Academy**  
12555 McDougall St.  
Detroit, Michigan 48212  
**Attn:** Administrative Assistant