



# Central Illinois Community Blood Center

1134 South Seventh Street, Springfield, IL 62703 • Fax (217) 753-8116  
 Visit our website at [www.cicbc.org](http://www.cicbc.org)

## EMPLOYMENT APPLICATION

CICBC is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

**PLEASE PRINT LEGIBLY OR TYPE. INCOMPLETE APPLICATIONS MAY NOT BE CONSIDERED.**

POSITION APPLIED FOR			POSITION LOCATION		TODAY'S DATE	
			Springfield, IL <input type="checkbox"/> Other <input type="checkbox"/>		/ /	
Date You Can Start	Can you work weekends?	Can you work evenings/nights?	Are You Employed Now?	Are you 18 years or older?	Desired Salary	
LEGAL NAME		Last	First	MI		
STREET ADDRESS			Apt.	CITY	STATE	ZIP
HOME TELEPHONE		ALT. TELEPHONE		E-Mail Address		
( )		( )				
Have you ever applied to CICBC before?			Yes	No	If yes, when?	
Have you ever worked for CICBC before?			Yes	No	If yes, when?	
Who referred you to CICBC? Please check appropriate box and explain below, if applicable						
<input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Friend <input type="checkbox"/> Employment Office <input type="checkbox"/> Employment Agency <input type="checkbox"/> Walk-In <input type="checkbox"/> Other						
<b>If your answer to any of the following questions is "yes" please attach a signed detailed explanation. An answer of yes will not necessarily exclude you from consideration.</b>						
1. Have you ever been fired from a job? (Downsize/layoff is not applicable.) <input type="checkbox"/> YES <input type="checkbox"/> NO						
2. Have you been convicted of a felony within the last 5 years? <input type="checkbox"/> YES <input type="checkbox"/> NO						
You need not disclose an arrest or conviction record that has been expunged or sealed.						
<b>HIGH SCHOOL GRADUATE</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>NUMBER OF YRS COMPLETED</b> _____ <b>GED</b> <input type="checkbox"/> YES <input type="checkbox"/> NO						
Name of High School last attended						
NAME & ADDRESS Of Colleges/ Universities/Trade School Attended			MAJOR	No. of Years Attended	DEGREE	Did you Graduate?
TECHNICAL/PROFESSIONAL LICENSE		NUMBER		STATE ISSUED	DATE ISSUED	

CURRENT (OR LAST) EMPLOYER			STARTING DATE	LEAVING DATE
ADDRESS		CITY		STATE ZIP
JOB TITLE	Starting Salary	Final Salary	May we contact your supervisor?	
			YES NO	
NAME OF SUPERVISOR		TITLE		PHONE
				( )
DESCRIBE DUTIES AND RESPONSIBILITES				
REASON YOU WOULD LEAVE CURRENT JOB				

PREVIOUS EMPLOYER			STARTING DATE	LEAVING DATE
ADDRESS		CITY		STATE ZIP
JOB TITLE	Starting Salary	Final Salary	May we contact your supervisor?	
			YES NO	
NAME OF SUPERVISOR		TITLE		PHONE
				( )
DESCRIBE DUTIES AND RESPONSIBILITES				
REASON FOR LEAVING				

PREVIOUS EMPLOYER			STARTING DATE	LEAVING DATE
ADDRESS		CITY		STATE ZIP
JOB TITLE	Starting Salary	Final Salary	May we contact your supervisor?	
			YES NO	
NAME OF SUPERVISOR		TITLE		PHONE
				( )
DESCRIBE DUTIES AND RESPONSIBILITES				
REASON FOR LEAVING				

**SPECIAL SKILLS or TRAINING (Please be specific)**

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**MILITARY SERVICE**

**Branch:** \_\_\_\_\_ **From:** \_\_\_\_\_ **to** \_\_\_\_\_

**Rank at Discharge:** \_\_\_\_\_

**PROFESSIONAL REFERENCES**

**Below, give the names of three persons to whom you are not related who can provide information about your work history or work skills**

NAME	TELEPHONE	BUSINESS	Years Known

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

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

4/2006

## **Notice to Applicant Before Requesting Consumer Report**

This is to inform you that, as part of our procedure for processing your employment application or at any time during your employment, we may obtain from a credit reporting agency a consumer report containing criminal and driving history about you.

We will not obtain such a report without your signed authorization.

We comply with the Fair Credit Reporting Act, which provides consumers with rights regarding consumer reports and which places specific obligations on employers using credit reports.

## Authorization for Employer to Obtain a Consumer Report

I authorize Central Illinois Community Blood Center to order a Consumer Report containing driving history and criminal information about me from a consumer reporting agency as part of the Company's investigation into my application for employment. I understand that, if hired, this authorization shall remain on file and shall serve as an ongoing authorization for Central Illinois Community Blood Center to procure consumer reports at any time during my employment period.

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

### Disclosure Statement

I hereby acknowledge that I have read the separate disclosure statement located on page 4 of this application regarding consumer reports and I understand it.

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

Employers who wish to use investigative consumer reports that may include interviews by the consumer reporting agency with friends, neighbors and family members of the applicant or employee are subject to additional disclosure and reporting responsibilities not discussed here.



**THE PREDICTIVE INDEX®**  
**Organization Survey**  
**Checklist**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Occupation: \_\_\_\_\_

**DIRECTIONS:** Please read the words in the list below and check those that you feel describe **the way you are expected to act by others.**

- |                     |                          |                     |                          |                     |                          |
|---------------------|--------------------------|---------------------|--------------------------|---------------------|--------------------------|
| Helpful .....       | <input type="checkbox"/> | Esteemed .....      | <input type="checkbox"/> | Calm .....          | <input type="checkbox"/> |
| Relaxed .....       | <input type="checkbox"/> | Worrying .....      | <input type="checkbox"/> | Popular .....       | <input type="checkbox"/> |
| Exciting .....      | <input type="checkbox"/> | Sentimental .....   | <input type="checkbox"/> | Polite .....        | <input type="checkbox"/> |
| Assertive .....     | <input type="checkbox"/> | Adventurous .....   | <input type="checkbox"/> | Dynamic .....       | <input type="checkbox"/> |
| Patient .....       | <input type="checkbox"/> | Easy going .....    | <input type="checkbox"/> | Good-humored .....  | <input type="checkbox"/> |
| Conscientious ..... | <input type="checkbox"/> | Unassuming .....    | <input type="checkbox"/> | Escapist .....      | <input type="checkbox"/> |
| Sophisticated ..... | <input type="checkbox"/> | Good mixer .....    | <input type="checkbox"/> | Generous .....      | <input type="checkbox"/> |
| Persistent .....    | <input type="checkbox"/> | Agreeable .....     | <input type="checkbox"/> | Unobtrusive .....   | <input type="checkbox"/> |
| Earnest .....       | <input type="checkbox"/> | Well-liked .....    | <input type="checkbox"/> | Daring .....        | <input type="checkbox"/> |
| Outstanding .....   | <input type="checkbox"/> | Docile .....        | <input type="checkbox"/> | Tolerant .....      | <input type="checkbox"/> |
| Sympathetic .....   | <input type="checkbox"/> | Demanding .....     | <input type="checkbox"/> | Nice .....          | <input type="checkbox"/> |
| Loyal .....         | <input type="checkbox"/> | Charitable .....    | <input type="checkbox"/> | Compelling .....    | <input type="checkbox"/> |
| Self-starter .....  | <input type="checkbox"/> | Persuasive .....    | <input type="checkbox"/> | Resolute .....      | <input type="checkbox"/> |
| Conventional .....  | <input type="checkbox"/> | Careful .....       | <input type="checkbox"/> | Tranquil .....      | <input type="checkbox"/> |
| Eloquent .....      | <input type="checkbox"/> | Satisfied .....     | <input type="checkbox"/> | Cultured .....      | <input type="checkbox"/> |
| Cynical .....       | <input type="checkbox"/> | Understanding ..... | <input type="checkbox"/> | Dominant .....      | <input type="checkbox"/> |
| Passive .....       | <input type="checkbox"/> | Spirited .....      | <input type="checkbox"/> | Respectful .....    | <input type="checkbox"/> |
| Gentle .....        | <input type="checkbox"/> | Congenial .....     | <input type="checkbox"/> | Nonchalant .....    | <input type="checkbox"/> |
| Brave .....         | <input type="checkbox"/> | Obedient .....      | <input type="checkbox"/> | Flexible .....      | <input type="checkbox"/> |
| Appealing .....     | <input type="checkbox"/> | Cheerful .....      | <input type="checkbox"/> | Attractive .....    | <input type="checkbox"/> |
| Thoughtful .....    | <input type="checkbox"/> | Obstinate .....     | <input type="checkbox"/> | Trusting .....      | <input type="checkbox"/> |
| Self-assured .....  | <input type="checkbox"/> | Convincing .....    | <input type="checkbox"/> | Eager .....         | <input type="checkbox"/> |
| Steady .....        | <input type="checkbox"/> | Responsive .....    | <input type="checkbox"/> | Shy .....           | <input type="checkbox"/> |
| Competitive .....   | <input type="checkbox"/> | Neighborly .....    | <input type="checkbox"/> | Fussy .....         | <input type="checkbox"/> |
| Fashionable .....   | <input type="checkbox"/> | Selfish .....       | <input type="checkbox"/> | Versatile .....     | <input type="checkbox"/> |
| Neat .....          | <input type="checkbox"/> | Reserved .....      | <input type="checkbox"/> | Amiable .....       | <input type="checkbox"/> |
| Audacious .....     | <input type="checkbox"/> | Serious .....       | <input type="checkbox"/> | Diplomatic .....    | <input type="checkbox"/> |
| Polished .....      | <input type="checkbox"/> | Persevering .....   | <input type="checkbox"/> | Self centered ..... | <input type="checkbox"/> |
| Fearful .....       | <input type="checkbox"/> |                     |                          | Consistent .....    | <input type="checkbox"/> |

**Organization Survey  
Checklist**

Name: \_\_\_\_\_

Start on other side of page.

**DIRECTIONS:** Continue by reading the words in the list below, now checking those that **you yourself believe really describe you.**

- |                     |                          |                     |                          |                     |                          |
|---------------------|--------------------------|---------------------|--------------------------|---------------------|--------------------------|
| Helpful .....       | <input type="checkbox"/> | Esteemed .....      | <input type="checkbox"/> | Calm .....          | <input type="checkbox"/> |
| Relaxed .....       | <input type="checkbox"/> | Worrying .....      | <input type="checkbox"/> | Popular .....       | <input type="checkbox"/> |
| Exciting .....      | <input type="checkbox"/> | Sentimental .....   | <input type="checkbox"/> | Polite .....        | <input type="checkbox"/> |
| Assertive .....     | <input type="checkbox"/> | Adventurous .....   | <input type="checkbox"/> | Dynamic .....       | <input type="checkbox"/> |
| Patient .....       | <input type="checkbox"/> | Easy going .....    | <input type="checkbox"/> | Good-humored .....  | <input type="checkbox"/> |
| Conscientious ..... | <input type="checkbox"/> | Unassuming .....    | <input type="checkbox"/> | Escapist .....      | <input type="checkbox"/> |
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| Earnest .....       | <input type="checkbox"/> | Well-liked .....    | <input type="checkbox"/> | Daring .....        | <input type="checkbox"/> |
| Outstanding .....   | <input type="checkbox"/> | Docile .....        | <input type="checkbox"/> | Tolerant .....      | <input type="checkbox"/> |
| Sympathetic .....   | <input type="checkbox"/> | Demanding .....     | <input type="checkbox"/> | Nice .....          | <input type="checkbox"/> |
| Loyal .....         | <input type="checkbox"/> | Charitable .....    | <input type="checkbox"/> | Compelling .....    | <input type="checkbox"/> |
| Self-starter .....  | <input type="checkbox"/> | Persuasive .....    | <input type="checkbox"/> | Resolute .....      | <input type="checkbox"/> |
| Conventional .....  | <input type="checkbox"/> | Careful .....       | <input type="checkbox"/> | Tranquil .....      | <input type="checkbox"/> |
| Eloquent .....      | <input type="checkbox"/> | Satisfied .....     | <input type="checkbox"/> | Cultured .....      | <input type="checkbox"/> |
| Cynical .....       | <input type="checkbox"/> | Understanding ..... | <input type="checkbox"/> | Dominant .....      | <input type="checkbox"/> |
| Passive .....       | <input type="checkbox"/> | Spirited .....      | <input type="checkbox"/> | Respectful .....    | <input type="checkbox"/> |
| Gentle .....        | <input type="checkbox"/> | Congenial .....     | <input type="checkbox"/> | Nonchalant .....    | <input type="checkbox"/> |
| Brave .....         | <input type="checkbox"/> | Obedient .....      | <input type="checkbox"/> | Flexible .....      | <input type="checkbox"/> |
| Appealing .....     | <input type="checkbox"/> | Cheerful .....      | <input type="checkbox"/> | Attractive .....    | <input type="checkbox"/> |
| Thoughtful .....    | <input type="checkbox"/> | Obstinate .....     | <input type="checkbox"/> | Trusting .....      | <input type="checkbox"/> |
| Self-assured .....  | <input type="checkbox"/> | Convincing .....    | <input type="checkbox"/> | Eager .....         | <input type="checkbox"/> |
| Steady .....        | <input type="checkbox"/> | Responsive .....    | <input type="checkbox"/> | Shy .....           | <input type="checkbox"/> |
| Competitive .....   | <input type="checkbox"/> | Neighborly .....    | <input type="checkbox"/> | Fussy .....         | <input type="checkbox"/> |
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| Neat .....          | <input type="checkbox"/> | Reserved .....      | <input type="checkbox"/> | Amiable .....       | <input type="checkbox"/> |
| Audacious .....     | <input type="checkbox"/> | Serious .....       | <input type="checkbox"/> | Diplomatic .....    | <input type="checkbox"/> |
| Polished .....      | <input type="checkbox"/> | Persevering .....   | <input type="checkbox"/> | Self centered ..... | <input type="checkbox"/> |
| Fearful .....       | <input type="checkbox"/> |                     |                          | Consistent .....    | <input type="checkbox"/> |

Please turn in your paper.