

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability or national origin. Consistent with the Americans with Disabilities Act, applicants may request accommodations needed to participate in the application process.

Last

PERSONAL INFORMATION

Date _____ Social Security Number _____

Name

Last First Middle

Preset Address

Street City State Zip

Permanent Address

Street City State Zip

Phone Number _____ Are you age 18 or older? YES NO

Referred By _____

First

EMPLOYMENT DESIRED

Position _____ Date You Can Start _____

Are you Employed Now? YES NO If So May We Inquire of Your Present Employer? YES NO

Ever Applied to this Company Before? YES NO If Yes When? _____

Middle

EDUCATION

School Name	School Name and Location (City State)	Circle Last Yr Completed	Did You Graduate?	Subjects Studied and Degrees Received
Grammar School			YES NO	
High School		1 2 3 4	YES NO	
College		1 2 3 4	YES NO	
Trade, Business, Correspondence School		1 2 3 4	YES NO	

GENERAL

Subjects of Special Study or Research Work:

Job Related Skills (typing, special driver's license, etc.):

Have you been convicted of a felony within the last 5 (five) years? YES NO

If Yes Have your civil rights been restored? YES NO

Have you been convicted of a felony or misdemeanor within the last 5 (five) years arising from the conduct of a solicitation for any charitable organization or sponsor purpose? YES NO

Call Center History

If you do not have any call center or telemarketing experience please continue to the next page!

Call Center or Company Name:					
Address:					
<small>Street</small>		<small>City</small>		<small>State</small> <small>Zip</small>	
Supervisor's Name:				Phone #:	
Type Of Experience:	In-Bound		Sales	Collections	Service
	Out-Bound		Fundraising	Survey	Other
Position:			Start Date:	Start Pay:	
Title:			End Date:	End Pay:	
Duties:					
Reason for Leaving:					

Call Center or Company Name:					
Address:					
<small>Street</small>		<small>City</small>		<small>State</small> <small>Zip</small>	
Supervisor's Name:				Phone #:	
Type Of Experience:	In-Bound		Sales	Collections	Service
	Out-Bound		Fundraising	Survey	Other
Position:			Start Date:	Start Pay:	
Title:			End Date:	End Pay:	
Duties:					
Reason for Leaving:					

Call Center or Company Name:					
Address:					
<small>Street</small>		<small>City</small>		<small>State</small> <small>Zip</small>	
Supervisor's Name:				Phone #:	
Type Of Experience:	In-Bound		Sales	Collections	Service
	Out-Bound		Fundraising	Survey	Other
Position:			Start Date:	Start Pay:	
Title:			End Date:	End Pay:	
Duties:					
Reason for Leaving:					

FORMER EMPLOYERS

List below your last three employers, starting with the last one first.

	Month and Year	Name and Address of Employer	Salary (upon leaving)	Position	Reason for Leaving
From					
To					
From					
To					
From					
To					

REFERENCES List below three persons not related to you, whom you have known at least one year.

Name	Address	Phone Number	Position	Years Acquainted

If you are hired, you will be required to attest to your identity and employment eligibility and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application and accompanying resume if provided are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation on this application is sufficient cause for refusal to hire or dismissal if I have been employed, no matter when discovered.

I understand that any employment is conditioned on a background check. I authorize NROTC to thoroughly investigate any and all statements contained in my application and/or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to NROTC without giving me prior notice of such disclosure. In addition I release NROTC, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application or conveyed during any interview is intended to create an employment contract. I further understand and agree that if I am hired my employment will be "at will" and without fixed term and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or NROTC. No promises regarding employment have been made to me, and I understand no such promise or guarantee is binding upon NROTC unless made in writing.

I understand that completing this form does not indicate there is a position open and does not obligate NROTC to hire me. If hired, I further agree to abide by all NROTC work rules, policies and procedures. NROTC retains the right to revise its policies, in whole or in part, at any time.

Date

Signature

PERSONALITY PROFILE

Name: _____

Date: _____ Phone#: _____

Enter a number in each box below that BEST represents your Personality Moods and Traits at WORK. Take your time and be as honest as possible.

There are NO wrong answers!

1 = SELDOM

2 = IN BETWEEN

3 = OFTEN

- | | | |
|--|--|---|
| <input type="checkbox"/> Artistic | <input type="checkbox"/> Persuasive | <input type="checkbox"/> Attention getter |
| <input type="checkbox"/> Stubborn | <input type="checkbox"/> Motivator | <input type="checkbox"/> Organizes Well |
| <input type="checkbox"/> Thrifty | <input type="checkbox"/> Analytical | <input type="checkbox"/> Neat & tidy |
| <input type="checkbox"/> Calm | <input type="checkbox"/> Quiet | <input type="checkbox"/> Adaptable |
| <input type="checkbox"/> Talkative | <input type="checkbox"/> Makes friends | <input type="checkbox"/> Fashionable |
| <input type="checkbox"/> Competitive | <input type="checkbox"/> Self Reliant | <input type="checkbox"/> Goal Setter |
| <input type="checkbox"/> Detailed | <input type="checkbox"/> Serious | <input type="checkbox"/> Humble |
| <input type="checkbox"/> Contented | <input type="checkbox"/> Consistent | <input type="checkbox"/> Witty |
| <input type="checkbox"/> Un-predictable | <input type="checkbox"/> Spontaneous | <input type="checkbox"/> Volunteer |
| <input type="checkbox"/> Confident | <input type="checkbox"/> Demanding | <input type="checkbox"/> Workaholic |
| <input type="checkbox"/> Listener | <input type="checkbox"/> Creative | <input type="checkbox"/> Skeptical |
| <input type="checkbox"/> Worrier | <input type="checkbox"/> Shy | <input type="checkbox"/> Obedient |
| <input type="checkbox"/> Life of the party | <input type="checkbox"/> Excitable | <input type="checkbox"/> Messy |
| <input type="checkbox"/> Independent | <input type="checkbox"/> Strong willed | <input type="checkbox"/> Un-emotional |
| <input type="checkbox"/> Perfectionist | <input type="checkbox"/> Sensitive | <input type="checkbox"/> Moody |
| <input type="checkbox"/> Patient | <input type="checkbox"/> Tolerant | <input type="checkbox"/> Compromising |
| <input type="checkbox"/> Trusting | <input type="checkbox"/> Sociable | <input type="checkbox"/> Restless |
| <input type="checkbox"/> Decisive | <input type="checkbox"/> Aggressive | <input type="checkbox"/> A Leader |
| <input type="checkbox"/> Persistent | <input type="checkbox"/> Logical | <input type="checkbox"/> Fussy |
| <input type="checkbox"/> Compassionate | <input type="checkbox"/> Even Tempered | <input type="checkbox"/> Sarcastic |

REQUIRED HOME EQUIPMENT CHECK LIST

I HAVE A COMPUTER WITH THE FOLLOWING HARDWARE INSTALLED AND IN WORKING ORDER:

ALL OF THE FOLLOWING SIX (6) ITEMS ARE REQUIRED!

256 MB Ram or Higher With A Minimum Processor Speed: 500 Mhz or Higher

A Color Monitor With A Minimum Resolution of 1024 X 768 16 Bit or Higher

Sound Card With Speakers

Fax/Voice Modem. (NOT THE SAME AS A DSL or Cable Modem) ----> [For More Info See Modem Faq](#)

Printer (*With Ink and A Supply Of Paper*)

High Speed DSL or Cable Internet Connection

I ALSO HAVE THE FOLLOWING SOFTWARE PROPERLY INSTALLED AND WORKING:

ALL OF THE FOLLOWING FOUR (4) ITEMS ARE REQUIRED!

MS Windows 2000 or Windows XP-SP2 or Windows Vista

A Configured MAPI E-Mail Client. (Outlook, Outlook Express, Eudora, etc...

Adobe Reader or FREE Foxit Reader

PDF Creator (Free Software) <http://www.pdfforge.org/>

HOW WILL YOU SEND FAXES?

ONLY ONE (1) OF THE FOLLOWING THREE (3) ITEMS IS REQUIRED!

I Can Send Faxes Directly From My Computer. If So How:

I Have A Fax Machine

I Will Use An Online Fax Service (Efax, Onefax Etc..) Name of Service:

OTHER REQUIREMENTS:

ALL OF THE FOLLOWING THREE (3) ITEMS ARE REQUIRED!

My Long Distance Service Provider Is:

My Internet Service Provider Is:

My Voicemail Provider Is: