



NTCA–The Rural Broadband Association  
Services Management Corporation  
Foundation For Rural Service

# Employment Application



4121 Wilson Boulevard  
Suite 1000  
Arlington, VA 22203-1839  
Phone: 703-351-2000

Asheville Service Center  
30 Town Square Boulevard  
Suite 300  
Asheville, NC 28803  
Phone: 828-252-9776

**APPLICATION FOR EMPLOYMENT** (please print legibly)

To Applicant: We deeply appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history is essential. We will review your qualifications and will make every effort to reach a decision as quickly as possible. Please fully complete the entire application.

NTCA complies with the law regarding reasonable accommodation for disabled employees. Applicants requiring reasonable accommodation in order to participate in the interview process are requested to contact Human Resources in order to arrange such accommodation.

It is NTCA's policy not to discriminate in its employment practices on the basis of race, religion, age, color, sex, national origin, disability, veteran status, or as otherwise required by applicable local or federal law.

<b>Last Name</b>		<b>First Name</b>		<b>Middle Name</b>	
<b>Address</b>				<b>Email</b>	
<b>City</b>		<b>State</b>	<b>Zip</b>	<b>Phone Number</b>	
<b>Position for Which You are Applying?</b>		<b>Date Available</b>	<b>Rate of Pay Desired (Per Year)</b>	<b>Referred By</b>	

Previously Employed by NTCA?  Yes  No      Able to Perform Overtime?  Yes  No      Work on Saturday and Sunday?  Yes  No

Will you be able to provide verification of your legal right to work in the United States if you are offered a position with NTCA?  Yes  No

To your knowledge do you have any physical or mental limitations or other disabilities that might require reasonable accommodation in order for you to perform satisfactorily the essential functions for which you are applying?  Yes  No

*if yes, please explain the disability and any reasonable accommodation necessary to perform the job for which you are applying:*

**EDUCATION AND TRAINING** (please note that academic transcripts may be required)

School Name	Location	Years Completed	Graduated		Major	Type of Degree
			Yes	No		
<i>High school</i>						
			<input type="checkbox"/>	<input type="checkbox"/>		
<i>Colleges</i>						
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
<i>Graduate School</i>						
			<input type="checkbox"/>	<input type="checkbox"/>		
<i>Technical School</i>						
			<input type="checkbox"/>	<input type="checkbox"/>		

<b>Primary Field of Graduate Study</b>	<b>Relevant Coursework</b>
--	----------------------------

**Research**

**Scholastic Honors, Scholarships, Assistantships**

## EMPLOYMENT EXPERIENCE

Please complete all appropriate items, even if you have already provided us with a resume.

Please list your job history for the past seven years or last five employers, whichever is greater, starting with your current or most recent position. Include any periods in which you were not employed and explain what you were doing that time. You may include U.S. military experience (show rank/rate at discharge), summer/part-time jobs, and cooperative education assignments if relevant to the job you have applied.

Current Employer Name		Employer Telephone (Area code/Number)	
Address		Starting Date (Mo./Yr.)	Leaving Date (Mo./Yr.)
City		State	Zip
Starting Position Title	Final Position Title	Name of Supervisor	Supervisor's Position Title
Is your current work performance satisfactory? <input type="checkbox"/> Yes <input type="checkbox"/> No		Explain reason for leaving:	
May we contact your present supervisor/employer? <input type="checkbox"/> Yes <input type="checkbox"/> No if no, when? _____		_____	
Describe your responsibilities and/or accomplishments:			
_____			

Previous Employer Name		Employer Telephone (Area code/Number)	
Address		Starting Date (Mo./Yr.)	Leaving Date (Mo./Yr.)
City		State	Zip
Starting Position Title	Final Position Title	Name of Supervisor	Supervisor's Position Title
Explain reason for leaving:			
_____			
Describe your responsibilities and/or accomplishments:			
_____			

Previous Employer Name		Employer Telephone (Area code/Number)	
Address		Starting Date (Mo./Yr.)	Leaving Date (Mo./Yr.)
City		State	Zip
Starting Position Title	Final Position Title	Name of Supervisor	Supervisor's Position Title
Explain reason for leaving:			
_____			
Describe your responsibilities and/or accomplishments:			
_____			

Previous Employer Name

Employer Telephone (Area code/Number)

Address

Starting Date (Mo./Yr.)

Leaving Date (Mo./Yr.)

City

State

Zip

Starting Position Title

Final Position Title

Name of Supervisor

Supervisor's Position Title

Explain reason for leaving:

Describe your responsibilities and/or accomplishments:

Previous Employer Name

Employer Telephone (Area code/Number)

Address

Starting Date (Mo./Yr.)

Leaving Date (Mo./Yr.)

City

State

Zip

Starting Position Title

Final Position Title

Name of Supervisor

Supervisor's Position Title

Explain reason for leaving:

Describe your responsibilities and/or accomplishments:

**REFERENCES PLEASE LIST THREE** (3) professional references:

Name

Job Title

Phone (Area Code/Number)

Years Known

Company Name

Email

Name

Job Title

Phone (Area Code/Number)

Years Known

Company Name

Email

<b>Name</b>	<b>Job Title</b>
<b>Phone (Area Code/Number)</b>	<b>Years Known</b>
<b>Company Name</b>	
<b>Email</b>	

**PRE-EMPLOYMENT STATEMENT** (This Statement Must be Signed.)

Please read the following statements carefully, as they represent matters of importance to both you and NTCA in connection with this application for employment.

I understand and agree that:

1. The information that I have provided on this application is accurate to the best of my knowledge. Any misrepresentation or omission of any relevant information in my application, resume or any other materials or during the interview process will be justification for refusal of employment, or, if employed, termination from NTCA employment.
2. NTCA may verify all the information provided by me, including but not limited to my education and employment, or may procure or have prepared an investigative consumer report for this purpose.
3. I voluntarily authorize NTCA to verify information related to my education, and employment (with the exception of current employment, until I have authorized such contact), and release from liability all persons or entities supplying or collecting such information.
4. I understand that should I be offered employment, that the offer is conditioned on my ability to comply with all United States immigration laws. I also understand that if I fail to provide documentation that establishes my identity and eligibility to work in the United States within the first three days of employment, the law requires that employment may be suspended until such documentation can be produced.
5. I understand that I am applying for a position with NTCA that is at-will. This means that if employed, my employment may be terminated at any time for any reason and that I, likewise, may terminate my employment at any time and for any reason. I further understand that this status may only be altered by the signing of a binding legal contract.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Application is active for 90 days.**