



Pérez Art Museum Miami
 1103 Biscayne Blvd.
 Miami, FL 33132
 305 375 3000
 pamm.org



Employment Application

IMPORTANT NOTICE: If you need assistance in completing this Application, please consult someone in the Human Resources Department. Applicants should be extremely careful as they complete this Application. Perez Art Museum Miami (the “Museum”) conducts a detailed background and pre-employment investigation process. This process may disclose inaccurate, false and/or incomplete or omitted information provided by you in this Application. Should this process determine any inaccurate or incomplete information, it could result in your either being disqualified from employment as an applicant, or termination if the inaccuracies are discovered subsequent to your employment. Accordingly, it is strongly suggested that you NOT complete this Application until you have the time and accurate information to do so.

The Museum is committed to complying with the Americans with Disabilities Act, as amended, and providing reasonable accommodations to enable qualified applicants with disabilities to have equal opportunity to apply for job openings. Any applicant who needs an accommodation due to a disability should contact the Human Resources Department.

EQUAL OPPORTUNITY EMPLOYER

The Museum is an equal opportunity employer and does not discriminate on the basis of an applicant’s or employee’s race, color, religion, national origin, sex, age, disability, veteran or marital status, genetic information, citizenship, sexual orientation, or any other legally protected status entitled to protection under federal, state, or local anti-discrimination laws. No questions on this Application are intended to secure information to be used for impermissible purposes.

Section 1 – Personal Information

Position applied for:	_____	Date of application:	_____
Name:	_____		
Have you ever worked under a different name?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
If yes, name:	_____		
Street Address:	_____		Home phone:
City/State/Zip:	_____		Cell phone:
Preferred email:	_____		Work phone:
Date available to start work:	_____		Referred by:





Section 2 – Personal Information (continued)

1. Are you legally authorized to work in the United States for the position you are seeking?
 Yes No Rate of pay expected: \$

2. Are you 18 years of age or older? Yes No

3. Do you have a valid driver's license? Yes No State of Issuance:

Note: Only answer these questions if you are applying for a position that requires driving. This information is used for a background investigation. Having a license is not a condition for employment if driving is not required.

Do you have a valid driver's license? Yes No
If yes, explain the circumstances:

4. Do you have any relatives working for the Museum? Yes No

5. Have you ever filed an application with us before? Yes No
If yes, give date:

6. Have you ever been employed by the Museum? Yes No
a) If yes, please give dates and state your name while employed, if different from your present name:

b) Why did your employment at the Museum cease?

Section 3 – Criminal History

7. Have you ever been convicted of a criminal offense, had adjudication of a criminal withheld, or pled nolo contendere (no contest) to a crime? Yes No

If yes, include details of each crime, the date of conviction, adjudication or plea, and the penalty imposed. In addition, please include information concerning all crimes to which you were adjudicated guilty or pled nolo contendere. A conviction does not automatically mean that an applicant will not be hired. The Museum generally will take into consideration when the offense occurred, the seriousness and nature of the violation, and any rehabilitation the applicant has undergone. Give all the facts so that an informed decision can be made. Although conviction of a crime generally is not an automatic bar to employment with the Museum, some jobs may not be held by persons convicted of certain crimes. Please provide details:

8. Have you ever been arrested for any crime that has not yet been adjudicated?
 Yes No If yes, please give details regarding arrest:





9. Have you ever been a plaintiff or defendant in a civil action for an intentional tort?

Yes No

An intentional tort is a civil wrong or injury (e.g., assault, battery, defamation, fraud, trespass, intentional infliction of emotional distress). If yes, include the nature of the intentional tort, type of action, the identity of the Court in which the case was/is being tried, and the disposition of the case:

10. In any previous employment, have you ever been accused of unlawful harassment or discrimination or ever been notified by any representative of management or human resources that you have been accused by a co-worker, customer or vendor of any form of unlawful harassment or discrimination? Yes No

If yes, please give details and ultimate outcomes of the complaint(s) or charge(s):

11. Have you ever been named as a defendant in a civil suit involving unlawful harassment or discrimination? Yes No

If yes, please provide details and outcomes of the case or disposition of the action:

Section 4 – Employment History

12. Are you currently employed? Yes No

13. If yes, may we contact your current employer? Yes No

14. Have you ever been fired, requested to resign, or allowed to resign from a position? Yes No

If yes, please give details and ultimate outcomes of the complaint(s) or charge(s):

15. Do you currently work under any agreement, such as a non-compete agreement, which would restrict your employment with the Museum? Yes No

If yes, please provide us a copy of the agreement with this application.





Section 5 – Employment History (continued)

Beginning with the *most recent*, please fill in the name of the employer, your job title, the dates you worked, and a brief description of your job responsibilities.

Employer		
Address		
Phone Number		
Job Title and Supervisor		
Dates of Employment	Starting(month/year):	Ending(month/year):
Starting/Final Salary	Starting(month/year):	Ending(month/year):
Reason for Leaving		
Job Duties		

Employer		
Address		
Phone Number		
Job Title and Supervisor		
Dates of Employment	Starting(month/year):	Ending(month/year):
Starting/Final Salary	Starting(month/year):	Ending(month/year):
Reason for Leaving		
Job Duties		

Employer		
Address		
Phone Number		
Job Title and Supervisor		
Dates of Employment	Starting (month/year):	Ending(month/year):
Starting/Final Salary	Starting(month/year):	Ending(month/year):
Reason for Leaving		
Job Duties		

Please explain all periods of unemployment greater than 30 days:





Section 6 – Education

	Name and Address	Course of Study	Years Completed	Diploma or Degree
High School				
Undergraduate College				
Graduate College				
Other (specify)				

Section 7 – Military Service

Branch of Service in the U.S. Armed Forces or State Militia:

Rank at time of discharge:

Type of job-related training and experience received:

Did you receive an honorable discharge? Yes No

If no, please explain reasons*:

(*Information supplied with respect to a dischargeable offense will not necessarily bar an applicant from consideration for employment. Nature of, reason for, and time elapsed since offense will be viewed in light of duties of job being sought.)

Use the space below to summarize any additional experience or training which you believe necessary to describe your full qualifications:





Section 8 – Personal References

Name	
Relationship/Occupation	
Address	
Phone Number	Years Known:
Name	
Relationship/Occupation	
Address	
Phone Number	Years Known:
Name	
Relationship/Occupation	
Address	
Phone Number	Years Known:





Section 9 – Authorization and Acknowledgement

Please read carefully, initial each paragraph and sign below:

Initial	I certify that the information I included in this Application is true and complete. I have answered each question completely, including information which the Museum may consider unfavorable. If I am employed, I understand and agree that falsified, inaccurate, misleading, incomplete, or omitted statements on this Application shall be grounds for dismissal.
Initial	I authorize investigation of all information contained in this Application. I also authorize the Museum and/or its designees to contact the references and employers listed in this Application to obtain any information concerning my previous employment and any pertinent information they may have, personal or otherwise; and I hereby release the Museum and/or its designees and any prior employers or references from all liability for any damages that may result from providing or utilizing such information; and I further agree not to sue any of them for any reason arising out of or pertaining to information as provided or used.
Initial	I also understand and agree that no representative of the Museum has any authority to enter into any employment agreement with me for employment for any specified period of time, or to waive or make any agreement contrary to the provisions of this document, unless it is in writing and signed by the President or Secretary of the Museum.
Initial	I understand and agree that, if I am hired, I must obey the rules, policies and regulations of the Museum.
Initial	I understand and agree that, if I am hired, my employment is “at-will”, and can be terminated by the Museum or me at any time, with or without cause, and without any prior notice. I further understand and agree that this Application is not intended to be, nor does it give rise to, a contract for employment; or in the event of employment, a contract for continued employment for any definite period of time.
Initial	I understand that applications for employment are considered for a period of 60 days. After this period of time, it will be necessary for me to request and file a new Application if I still wish to be considered for employment.
Initial	I hereby represent and agree that I have read and fully understand the foregoing and seek employment under these conditions of my own free will and in accordance with my own judgment.

APPLICANT SIGNATURE

DATE

EQUAL OPPORTUNITY EMPLOYER
DRUG-FREE WORKPLACE

