



Smithsonian Enterprises

Smithsonian Institution  
PO Box 37012, MRC 513  
Capital Gallery, Suite 6001, 600 Maryland Avenue, SW  
Washington, DC 20013-7012

**Application for Employment**  
(You must complete the application fully)

**PERSONAL INFORMATION**

Position for which you are applying \_\_\_\_\_ Today's date \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M. I. \_\_\_\_\_

Street Address \_\_\_\_\_ Unit/Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Day Phone \_\_\_\_\_

Have you ever worked for the Smithsonian Institution? Yes  No  If yes, list last position.

Position	Department/Museum	Supervisor	Employment Dates (Month/Yr.)
_____	_____	_____	Start _____ End _____

**EDUCATION/TRAINING/SKILLS**

Education	Name and Address of School Attended	Highest Year Completed (Circle)				Did you Graduate?	Degree
		9	10	11	12		
High School:						Yes <input type="checkbox"/> No <input type="checkbox"/> Attending <input type="checkbox"/>	
College:						Yes <input type="checkbox"/> No <input type="checkbox"/> Attending <input type="checkbox"/>	
Graduate School:						Yes <input type="checkbox"/> No <input type="checkbox"/> Attending <input type="checkbox"/>	

Additional Training/Skills Information: Skills and Information Relating to Position Applied or General Interest.

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## EMPLOYMENT EXPERIENCE

Starting with today, account for your last 10 years of work experience including paid volunteer, and/or unemployed periods. Provide as much detail as possible. You may attach additional pages and/or a resume to supplement this application. Please explain any gaps in employment of more than three months.

\*May we contact your current employer? Yes  No

1. Company Name					Start	End
Address		City	State	Zip	Telephone (    )	
Job Title			Supervisor's Name			
Starting Salary	Ending Salary	Reason for Leaving				
Description of Duties						
2. Company Name					Start	End
Address		City	State	Zip	Telephone (    )	
Job Title			Supervisor's Name			
Starting Salary	Ending Salary	Reason for Leaving				
Description of Duties						
3. Company Name					Start	End
Address		City	State	Zip	Telephone (    )	
Job Title			Supervisor's Name			
Starting Salary	Ending salary	Reason for Leaving				
Description of Duties						

**EMPLOYMENT EXPERIENCE (CONTINUED)**

4. Company Name					Start	End
Address		City	State	Zip	Telephone (    )	
Job Title			Supervisor's Name			
Starting Salary	Ending Salary	Reason for Leaving				

Description of Duties

**SCHEDULE AVAILABILITY**

**For Retail Store Sales Associate and Theater Host Positions Only. Smithsonian Enterprises reserves the right to change the hours of operation as the business requires.**

Specify hours available for each day of the week.	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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Are you applying for Full Time?  Part Time?

Are you able to work overtime? Yes  No

Are you able to work rotating shifts? Yes  No

Are you able to work holidays? Yes  No

If not, list restrictions \_\_\_\_\_

**\*Flexibility is important; lack of availability could affect employment decisions.**

**ADDITIONAL INFORMATION**

Do you have any relatives currently employed by the Smithsonian Institution? [Spouse, spouse's parents, grandparent, grandchild, In-laws (Father, mother, son, brother, sister, or daughter), aunt, uncle, cousin, nephew, niece, or child, parent (s), brother, sister (Natural, step, adopted, or foster)]. Yes  No

If yes, list relative(s) working for the Institution.

Name	Relationship	Department	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**ADDITIONAL INFORMATION (CONTINUED)**

Are you under 18 years of age? Yes  No

Are you legally eligible to work in the United States? Yes  No

*\*Proof of identity and employment eligibility is required upon offer of employment.*

Have you ever been convicted of a crime? Yes  No  If yes, please explain

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

**APPLICANT'S STATEMENT/DISCLOSURE**

I understand that if employed, my employment is for no definite term and is terminable by me or Smithsonian Enterprises in a manner consistent with applicable Smithsonian Enterprises or Smithsonian Institution policies. I further understand that no agent or representative of Smithsonian Enterprises or Smithsonian Institution is authorized to offer or guarantee any definite term of employment.

I hereby affirm the information given in this application, attached resume (if any), and applicant information record is true and accurate to the best of my knowledge and belief, and that I have not knowingly withheld any facts or circumstances that would, if disclosed, affect my application unfavorably. I further understand that any misrepresentation or omission of facts is just cause for separation at any time.

I hereby authorize the Smithsonian to thoroughly investigate my background, references, employment record, and other matters related to my suitability for employment. I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by the Smithsonian to provide any relevant information regarding my current and previous employment, experience, reputation, character, ability, and job-related qualifications for employment. And release all persons, schools, and employers of any lawsuit or liability for providing such information.

Filling out this form does not indicate there is a position open and does not obligate the Smithsonian Enterprises to hire me.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR HUMAN RESOURCES USE ONLY**

Was candidate interviewed? Yes  No  If not, Reason \_\_\_\_\_

Time and Date \_\_\_\_\_ Interviewer \_\_\_\_\_ Job Announcement Number: \_\_\_\_\_

Hired? Yes  No  Requisition Number \_\_\_\_\_

Start Date: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Location: \_\_\_\_\_

Hiring Manager's Name \_\_\_\_\_ Hiring Manager's Signature \_\_\_\_\_

Type of Appointment:

Type of Schedule:

1. Indefinite

1. Full Time

2. Temporary

2. Part time

3. Intermittent