

5601 Bridge St. Ste. 300, Fort Worth, Texas 76112

Main Office: 817-586-4470

www.humafaith.org

Paid Internship/Apprenticeship Application

Huma-Faith is dedicated to empower and enhance the lives of improvised, unemployed, under-skilled, and/or unemployable persons in need of a paid internship/apprenticeship program that will lead to gainful employment. This Internship/Apprenticeship is purposed to develop work ethics, skill, self-esteem, self-efficacy, and lead to employment. Internship/Apprenticeship shall be a minimum of **three consecutive months and not exceed six consecutive months**. Participants may receive a stipend of \$30 for each work day up to the federal minimum wage. **DO NOT** fill-out this application unless you're certain that you meet the following criteria:

- You and family you reside with live under the federally defined poverty level, and have
- Proof of receiving government subsidy benefits (e.g. SNAP, SSI, Medicaid, WIC, etc.), or
- Proof of Homelessness (e.g. Homeless Certification, etc.), or
- Proof of barriers to employment (e.g. criminal history, mental health disabilities, physical disabilities, etc.)

<u>PLEASE TYPE OR PRINT</u>. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid job numbers will not be considered for any position.

Position Applying For: JOB #:	Name (Last, First, Middle):				Other names under which you have attended school or been employed:		
Street Address:				City	, State & Zip:	-	
Street Address:				City	, state & Zip.		
Social Security Number: Hom		Home I	Phone: Work Phone		Work Phone:	Other Phone:	
Are you eligible to work in the United States?			Yes	No			
Are you 18 years of	f age or older?		Yes	No	If NO, what is your c	urrent age?	
Have you ever been			Yes	No	If YES, what were the charges and dates of		
felony?					conviction?		
Are you able to work in a faith-based environment?		☐ Yes [No	If YES, will you respect preferences of all clien			
Are you related to any current (company employee)?		Yes [No	If YES, their name & their relationship to you?			
If required for position, do you have a		Yes [No	If YES, State of issuance, license #, and expirati			
valid driver's license?				date:			
How did you learn about this employment opportunity at Huma-Faith? Check all that apply: Ad in newspaper							
l _ _				Dept.	ebfiltæbor	Ad in <i>magazine</i>	
Referral by employee Other:							



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Name of School	City/State	Did you graduate?	If No, # of years left to graduate	If Yes, date of Graduation	Degree received	Major
High School:		Yes No				
GED:		Yes No				
Other School:		Yes No				
College:		☐Yes ☐ No				
College:		☐Yes ☐ No				
College:		☐Yes ☐ No				
Other credentials/ license					· · · · · · · · · · · · · · · · · · ·	
KILLS: Please list techniques and software packatermediate, expert)						

WORK EXPERIENCE-Please detail your <u>entire</u> work history. Begin with your <u>current</u> or most recent employer. If you held multiple positions with the same organization, detail each position separately. <u>Attach additional sheets if necessary</u>. Omission of prior employment may be considered falsification of information. Please explain any gaps in employment. Include full-time military or volunteer commitments. **PLEASE DO NOT** complete this information with the notation "See Resume."



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PLEASE NOTE: Huma-Faith reserves the right to contact all current and former employers for reference information.

Starting Salary: Organization Name and Address:	Dates Employed (most recent position) From: To	Full time Part-time	Title:
Final Salary: Supervisor's Name, Title and Phone #: Other Reference Name, Title and Phone #: At any time Only if I am a finalist candidate Primary duties: Reason for Leaving: Dates Employed (most recent position) Full time Part-time Title: Starting Salary: Organization Name and Address: Final Salary: Organization Name and Address: Supervisor's Name, Title and Phone #: Other Reference Name, Title and Phone #: Only if I am a finalist candidate Primary duties: Reason for Leaving: Supervisor's Name, Title and Phone #: Other Reference Name, Title and Phone #: Only if I am a finalist candidate Primary duties: Reason for Leaving: Primary duties: Reason for Leaving: Reason for Leaving: Primary duties: Reason for Leaving: Reason for Leaving: Primary duties: Reason for Leaving: Reason for Leaving: Reason for Leaving: Primary duties: Reason for Leaving: Reason			
Phone #:		Organization Name and Address.	
Dates Employed (most recent position) From: To			☐ At any time
position) From: To If part-time Part-time From: To If part-time, # hrs./wk: Starting Salary: Organization Name and Address: Final Salary: Supervisor's Name, Title and Other Reference Name, Title and Phone #: At any time Only if I am a finalist candidate Primary duties: Reason for Leaving: PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION. Lectrify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or miscpresentation or omission of facts, represents grounds for elimination from considerant for employment, or termination after employment if discovered at a later date. I authorize Huma-Faith to investigate, without liability, to make full supporting materials. I authorize references and former employers, without liability, to make fully inquiries in connection with this application for employment, I requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of Huma-Faith serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, to be meltis hickleding paid time off. If employed on a reuplary hearty to a reup of the party	Primary duties:		Reason for Leaving:
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Supervisor's Name, Title and Phone #: Other Reference Name, Title and Phone #: Contact my current references: At any time Only if I am a finalist candidate Primary duties: Reason for Leaving: Reason for Leaving:	Starting Salary:		
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