

## Application for Employment

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### General Information

Full name: \_\_\_\_\_ Maiden name: \_\_\_\_\_

Email address: \_\_\_\_\_

Present address: \_\_\_\_\_

Mailing address if different than above: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Alt. telephone number: \_\_\_\_\_

Social Security number: \_\_\_ - \_\_\_ - \_\_\_\_\_ If under 18, please enter DOB: \_\_/\_\_/\_\_\_\_

Position applied for: \_\_\_\_\_ Salary desired: \_\_\_\_\_

Employment desired:  Full time  Part time When are you available for work? \_\_/\_\_/\_\_\_\_

### Schooling

High school attended: \_\_\_\_\_ Location: \_\_\_\_\_, \_\_\_

Did you graduate?  Yes  No Major and degree: \_\_\_\_\_

College: \_\_\_\_\_ Location: \_\_\_\_\_, \_\_\_

Did you graduate?  Yes  No Major and degree: \_\_\_\_\_

College: \_\_\_\_\_ Location: \_\_\_\_\_, \_\_\_

Did you graduate?  Yes  No Major and degree: \_\_\_\_\_

Graduate school: \_\_\_\_\_ Location: \_\_\_\_\_, \_\_\_

Did you graduate?  Yes  No Major and degree: \_\_\_\_\_

## Military

Have you ever been in the armed forces?  Yes  No

If yes, were you honorably discharged?  Yes  No

If yes, date entered: \_\_/\_\_/\_\_\_\_ Discharge date: \_\_/\_\_/\_\_\_\_

## Work Experience

Name of employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Your job title: \_\_\_\_\_ Name and title of supervisor: \_\_\_\_\_

State date: \_\_/\_\_/\_\_\_\_ End date: \_\_/\_\_/\_\_\_\_

Start salary: \_\_\_\_\_

End salary: \_\_\_\_\_

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Name of employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Your job title: \_\_\_\_\_ Name and title of supervisor: \_\_\_\_\_

State date: \_\_/\_\_/\_\_\_\_ End date: \_\_/\_\_/\_\_\_\_

Start salary: \_\_\_\_\_

End salary: \_\_\_\_\_

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Name of employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Your job title: \_\_\_\_\_ Name and title of supervisor: \_\_\_\_\_

State date: \_\_/\_\_/\_\_\_\_ End date: \_\_/\_\_/\_\_\_\_

Start salary: \_\_\_\_\_

End salary: \_\_\_\_\_

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Name of employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Your job title: \_\_\_\_\_ Name and title of supervisor: \_\_\_\_\_

State date: \_\_/\_\_/\_\_\_\_ End date: \_\_/\_\_/\_\_\_\_

Start salary: \_\_\_\_\_

End salary: \_\_\_\_\_

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Are there any other skills you believe is pertinent to the position you are applying for? If so, please explain.

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### Other

For any professional positions within our agency, a driver's license or reliable transportation is required. Most of our services are home-based, so a lack of transportation is not an acceptable reason for a child not to receive services.

Do you have a license?  Yes  No License number: \_\_\_\_\_ Issuing State: \_\_

If you do not have a license, how will you get to your sessions? \_\_\_\_\_

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Have you ever been convicted of a crime?  Yes  No

If yes, please explain number of convictions, nature of offense(s) leading to conviction(s), when were you convicted, sentence(s) imposed, and types of rehabilitation.

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Please list three professional references.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: (\_\_\_\_)\_\_\_\_ - \_\_\_\_

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Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: (\_\_\_\_)\_\_\_\_ - \_\_\_\_

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Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: (\_\_\_\_)\_\_\_\_ - \_\_\_\_

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I certify that all the information submitted in this application is true and complete. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations and I agree that my employment and compensation can be terminated/altered with or without cause and with or without notice, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at anytime by the company. I understand that no company representative, other than the Executive Director or Director of Operations has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

Signature \_\_\_\_\_

Date \_\_/\_\_/\_\_\_\_