



APPLICATION FOR EMPLOYMENT

Date: _____

Name: _____
Last First Middle

Present Address: _____

Permanent Address: _____

Day Phone: _____ Evening Phone: _____

EMPLOYMENT DESIRED

Position Applying for: _____

Salary Desired: _____

What type of work you applying for?

Regular full-time Yes No

Regular part-time Yes No

Temporary Yes No If yes, what period will you be available? From _____ To _____

What days and hours are you available for work? _____

Are you available to work on weekends? Yes No

Would you be available to work overtime, if necessary? Yes No

If hired, on what date can you start work? ____ / ____ / ____

Why are you applying for work at the Child Abuse Prevention Center?

PERSONAL INFORMATION

Have you ever applied to or worked for the Child Abuse Prevention Center before? Yes No

If yes, when? _____

Do you have any relatives working for the Child Abuse Prevention Center? Yes No

If yes, state name(s) and relationship: _____

Are you at least 18 years old? Yes No
(If under 18, hire is subject to verification that you are of minimum legal age.)

If hired, would you have a reliable means of transportation to and from work? Yes No

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? Yes No
 If yes, state the nature of the crime(s), when and where convicted and disposition of the case.

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Are you currently employed? Yes No If yes, may we contact your current employer? Yes No

EDUCATION, TRAINING AND EXPERIENCE

School	Name and Address	No of years completed	Did you graduate?	Degree/Diploma
College/ University	_____ Name _____ Address _____ City State Zip			
High School	_____ Name _____ Address _____ City State Zip			
Vocational/ Business/ Other	_____ Name _____ Address _____ City State Zip			

School	Name and Address	No of years completed	Did you graduate?	Degree/Diploma
Other	<hr/> Name <hr/> Address <hr/> City State Zip			
Other	<hr/> Name <hr/> Address <hr/> City State Zip			

Do you have any other experience, training, qualifications, or skills that you feel make you especially suited for work at the Child Abuse Prevention Center? Yes No

If yes, please explain:

Answer the following questions if you are applying for a professional position:

Are you licensed/certified in California for the job applied for? Yes No

Name of license/certification: _____ Issuing state (if not CA): _____

License/certification number: _____

Has your license/certification ever been revoked or suspended? Yes No

If yes, state reason(s), date of revocation or suspension and date of reinstatement: _____

Answer the following questions if you are applying for a position that requires driving:

Do you have a valid California Driver License? Yes No

Do you have access to a car or other motorized vehicle? Yes No

Do you have or can you obtain liability insurance on such a vehicle? Yes No

EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

_____ Employer's Name _____ Employer's Address City _____ State _____ Zip _____ _____ Employer's Telephone Number	_____ Supervisor's Name _____ Dates of Employment May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Job Title Job Responsibilities: _____ _____ _____ Reason for Leaving: _____ _____
_____ Employer's Name _____ Employer's Address City _____ State _____ Zip _____ _____ Employer's Telephone Number	_____ Supervisor's Name _____ Dates of Employment May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Job Title Job Responsibilities: _____ _____ _____ Reason for Leaving: _____ _____
_____ Employer's Name _____ Employer's Address City _____ State _____ Zip _____ _____ Employer's Telephone Number	_____ Supervisor's Name _____ Dates of Employment May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Job Title Job Responsibilities: _____ _____ _____ Reason for Leaving: _____ _____
_____ Employer's Name _____ Employer's Address City _____ State _____ Zip _____ _____ Employer's Telephone Number	_____ Supervisor's Name _____ Dates of Employment May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Job Title Job Responsibilities: _____ _____ _____ Reason for Leaving: _____ _____

PROFESSIONAL REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years.

First Name _____		Last Name _____	
Address _____		City _____	State _____ Zip _____
Telephone Number _____	Occupation _____		Number of years acquainted _____
First Name _____		Last Name _____	
Address _____		City _____	State _____ Zip _____
Telephone Number _____	Occupation _____		Number of years acquainted _____
First Name _____		Last Name _____	
Address _____		City _____	State _____ Zip _____
Telephone Number _____	Occupation _____		Number of years acquainted _____

Please read carefully, initial each paragraph, and sign below.

<p>_____</p> <p>Initials</p>	<p>I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.</p>
<p>_____</p> <p>Initials</p>	<p>I hereby authorize the Child Abuse Prevention Center to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the Child Abuse Prevention Center any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Child Abuse Prevention Center, my former employers and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.</p>
<p>_____</p> <p>Initials</p>	<p>I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Child Abuse Prevention Center. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Child Abuse Prevention Center, and that no promises or representations contrary to the foregoing are binding on the Child Abuse Prevention Center unless made in writing and signed by me and the designated representative.</p>
<p>_____</p> <p>Initials</p>	<p>Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Child Abuse Prevention Center, I am entitled to copies of such public records obtained by the Child Abuse Prevention Center unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.</p> <p><input type="checkbox"/> I waive receipt of a copy of any public record described in the paragraph above.</p>
<p>_____</p> <p>Initials</p>	<p>In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.</p>
<p>_____</p> <p>Initials</p>	<p>I understand that if I am hired, I will be required to attend Mandated Reporter Training within the first three months of my employment. I understand that all employees of the Child Abuse Prevention Center are responsible for reporting suspected child abuse under state law (California Penal Code 11166).</p>
<p>_____</p> <p>Initials</p>	<p>I hereby authorize the Child Abuse Prevention Center to conduct a National Service Criminal History Check on my criminal history (if any) and to share the results of the check with the AmeriCorps program, as appropriate.</p>

Date

Applicant Signature