

OLIVIA'S HOUSE STAFF APPLICATION

Applicants are not required to give any information that is prohibited by federal, state/provincial, or local law.

Date _____ Social Security/Insurance Number _____ - _____ - _____

Name _____
 Last First Middle Preferred Name

Current Address _____
 Number and Street City, State/Province, Zip/Postal Code

Previous Address (if current address is less than 5 years) _____

Home Phone # _____ Work Phone # _____ Driver's License # _____

Has your driver's license ever been suspended or revoked? Yes No
 If so, please explain: _____

Have you ever entered a plea of guilty to, been convicted of, or forfeited bond in relation to a felony, misdemeanor, summary offense or any dishonest act, including driving while intoxicated?
 Yes No

Have you ever been bonded? Yes No Have you ever been denied bond coverage? Yes No

Are you authorized to work in the United States? Yes No

Would you work: Full Time Part Time Date available for work _____
 If part-time, specify days and hours _____

Education and Training

High School Name	Location	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	GPA

List Business Schools, Trade Schools, and Colleges attended	Location	Dates Attended (From-To)	Date you did/will graduate	College Major	Degree Received	Grade Point Average

Work History Data

List most recent employer first. Include part-time employment.

Employment Dates		Company and Address	Position or Type of Work	Salary	Immediate Supervisor	Reason for Leaving
From	To					

Describe duties performed in above listed work experience.

Skills

Other Languages (list below)

Computer Skills (list below)

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Describe any additional job-related experiences, licensing, special skills or knowledge, which would be helpful in considering you for employment.

References

Give the names and addresses of two individuals, not related, who know you well and to whom we may refer.

Name	Address	Phone Number	Occupation

If currently employed, may your employer be contacted at this time for a reference? Yes No

What starting salary do you expect? _____ per _____

Have you signed a restrictive covenant/non-compete agreement or confidentiality statement at a prior job?

___ No ___ Yes If Yes, please explain _____

Have you ever been disciplined or discharged by an employer for client abuse or neglect?

___ No ___ Yes If Yes, please explain _____

The information I have provided is complete and accurate to the best of my knowledge. I also understand that providing the information may disqualify me from further consideration.

I authorize this agency to contact:

- *My previous employers*
- *The schools I attended*
- *The personal references I have listed*

I also authorize this agency to make other investigation of my personal, financial, or credit background (including) obtaining a credit report (also known as a "consumer report" under the Fair Credit Reporting Act/Consumer Reporting Act) for the purpose of evaluating my qualifications for candidate screening. This authorization extends for twelve (12) months from today's date.

Applicant's Signature _____ Date _____

AUTHORIZATION AND RELEASE OF INFORMATION

I hereby give Northwestern Human Services, hereafter known as NHS, and any of its affiliates and divisions, the right to thoroughly investigate my past employment, education, police record, activities, and I release from all liability all persons, companies, and corporations supplying such information. I indemnify NHS against any liability which might result from conducting such an investigation. I understand that any false answers or statements or implications made by me in this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

Additionally, I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between NHS and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon NHS unless made in writing by the President and Chief Executive Officer. If any employment relationship is established, I understand that I have the right to terminate my employment at any time for any reason or no reason at all, with or without prior notice, and that NHS retains the same right.

SIGNATURE OF APPLICANT

DATE