# Pendleton Place, Inc.



### **Employment Application**

		APPLICANT INFO	RMATION		
Full	Name: Last	First		Middle	
Date of Birth:					
Home Phone:			Cell Phone:		
Email Address:					
Current Address:  Street Address  Apartment/Unit #					Apartment/Unit #
Permanent Address		City		State	ZIP Code
		: Street Address			Apartment/Unit #
		City		State	ZIP Code
Please list	t your prio	or addresses for the <u>last five years</u> :			
Year(s)	Street Addre	ss			Apartment/Unit #
	City			State	ZIP Code
Year(s)	Street Addre	ss			Apartment/Unit #
	City			State	ZIP Code
Year(s)	Street Addre	ess			Apartment/Unit #
	City			State	ZIP Code

EMPLOYMENT DESIRED					
Position Applying For:					
Referred By:					
What days and hours are you available to work?					
If hired, on what date can you start work?					
Desired Salary: (Please specify \$/hour or year)	Per				
Are you applying for regular full-time work?					
Are you applying for regular part-time work?					
Are you available to work on the weekends?					
Would you be available to work overtime, if necessary?					

#### PERSONAL INFORMATION

Have you ever applied to or worked for Pendleton Place, Inc.?

If yes, when?

Do you have friends or relatives working for Pendleton Place, Inc.?

If yes, state name(s) and relationship:

If hired, would you have reliable means of transportation to and from work?

Are you at least 21 years old?

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)?

If yes, state the nature of the crime(s), the date and location of the conviction, and disposition (e.g., sentence, probation, etc.) of the case:

(Note: A conviction will not necessarily disqualify an applicant from employment. The nature of the offense, the date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for will be considered in making any hiring decision.

### **EMPLOYMENT HISTORY**

List below <u>all</u> present and past employment starting with your most recent employer. Attach a separate page if necessary. Account for all periods of unemployment. You must complete this section even if attaching a resume.

Current Employer							
Employer	Telephone No.	Dates of Employment (from MM/YY)	Dates of Employr	ment (to MM/YY)			
Type of Business		Supervisor's Name	Pay (\$ per Hour or Year)				
No. & Street Address		City	State	Zip Code			
Position & Duties							
Reason for Leaving							
May we contact your current supervisor for a reference?							
Previous Employer							
Employer Telephone No.		Dates of Employment (from MM/YY)	Dates of Employment (to MM/YY)				
Type of Business		Supervisor's Name	Pay (\$ per Hour or Year)				
No. & Street Address		City	State	Zip Code			
Position & Duties							
Reason for Leaving							
May we contact your former	supervisor for a refere	nce?					

**Previous Employer** 

Employer Telephone No. Dates of Employment (from MM/YY) Dates of Employment (to MM/YY)

Type of Business Supervisor's Name Pay (\$ per Hour or Year)

No. & Street Address City State Zip Code

Position & Duties

Reason for Leaving

May we contact your former supervisor for a reference?

### **EDUCATION, TRAINING, & EXPERIENCE**

#### Starting with your most recent school attended, provide the following information:

Years Did You Degree or School (include City & State) Completed? Graduate? Diploma

Some of our clients speak English on a limited basis. Do you speak, write, or understand any foreign languages?

If yes, which language(s)?

Do you have any other experience, training, qualifications, or skills which you feel make you especially suited for work at Pendleton Place Children's Shelter?

If yes, please explain

Do you have one or more years of childcare experience?

Do you have any lived experience with foster care or homelessness?

## Answer the questions in this section if you are applying for a position requiring licensing or certification

Are you licensed/certified to work with children (birth – 21 years) who have been abused or neglected? i.e. Social Work, Counseling etc.

Name of license/certification Issuing State License/Certification Number

Have you ever had a license application denied?

If yes, state the reason(s) and date of application and agency to which application was submitted.

Has your license/certification ever been revoked or suspended?

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

CERTIFICATION	
lease read carefully, initial each paragraph and sig	n below:
that I have personally completed this application. I used to	mation that might adversely affect my chances for true and correct to the best of my knowledge. I further certify understand that any omission or misstatement of material secure employment shall be grounds for rejection of this byed, regardless of the time elapsed before discovery.
related to my suitability for employment and, further Pendleton Place any and all letters, reports and oth prior notice of such disclosure. In addition, I hereby	te my references, work record, education and other matters r, authorize the references I have listed to disclose to the references in the references in the records, without giving me are release Pendleton Place, my former employers and all and all claims, demands or liabilities arising out of or in any
I understand that Pendleton Place, Inc. is a drug-freuse before hiring and during the course of employm	ee and alcohol-free workplace and will screen for illegal drug nent.
State Law Enforcement Division; 2) a fingerprint rev 3) a check of the State Central Registry of Child Ab	g background checks: 1) a criminal history check with the SC view to be conducted by the Federal Bureau of Investigation; use and Neglect and department records; 4) the equivalent erson has resided in the previous five years; 4) the National er registry.
I understand that this application will remain active considered for employment with Pendleton Place, Inot be processed and that I may contact the Assistant application.	nc. I further understand that an incomplete application will
TERMINATE MY EMPLOYMENT AT ANY TIME FO	MY EMPLOYMENT IS "AT WILL" AND THAT I MAY DR ANY REASON OR FOR NO REASON, WITHOUT ERMINATE MY EMPLOYMENT AT ANYTIME FOR ANY
oplicant's gnature:	Date:
For Office use Only:	
1846-0130-2539, v. 1	Hire Date: