

APPLICATION FOR EMPLOYMENT

Childhaven is a equal opportunity employer. Various federal, state, and local laws prohibit discrimination based on race, color, sex, religion, national origin, ancestry, age, disability or marital status. Your response to any question will not be used as a basis for discrimination, but will be judged on its relevance to the position you are seeking.

DEMOGRAPHIC INFORMATION

DATE	OF	APPL	ICATION	

Name	Last	Firs	t	
Home Address	City	State	Zin	
nome Address	City	State	Zip	
Mailing Address	City	State	Zip	
	,		P	
Phone Number 1		Phone Number 2		
		Flidhe Nulliber 2		
()		()		
Age				
21 Years or Older	25 Years or Older			

AVAILIBILITY

Position Applying For (1 st Choice)			Position Ap	Position Applying For (2 nd Choice)				
How Did You Hea	ar Of This Job O	pening?						
Date You Can St	art			Are You Int	erested In (che	ck all that apply)		
				🗌 Full-	Time 🗌 F	Part-Time	Temporary	
Days And Hours	Available							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	l
Start Time								
End Time]
Are you ava	ailable to work o	on holidays?	Yes [No				-

EDUCATION

	Name and Location of School	Degree/Area of Study	Number of Years Attended	Certificate Received
Lich Cohool (CED	Name			
High School /GED	City/State			
College	Name			
College	City/State			
Craduata Cabaal	Name			
Graduate School	City/State			
Other	Name			
Other	City/State			

CHILDHAVEN APPLICATION FOR EMPLOYMENT LICENSURE/CERTIFICATION/SKILLS

	1011/0101220				
Are you currently certified in a	any of the following?				
CPR First Aid EMT CDL Other (please specify):					
List any languages in which ye	ou have skills (other t	:han English). Please ra	ate your proficiency	y: 1=Fluent, 2=Proficient	t, 3=Basic, 4=Elementary
Language	_ Rating	Language	Rating	Language	Rating
Please list any other experience	ce or relevant training	j you have:			

EMPLOYMENT/VOLUNTEER HISTORY

List Employment starting with your most recent position.						
Account for any time during this period in which you were unemployed by stating the nature of your activities. Please indicate if you were employed under a different name.						
	e you Currently Employed? May we contact your current employer?					
Yes 🗌		Yes N	0			
May we contact yo	our past employer(s)?					
		rge:				
Have you ever bee	n discharged from employm	ent?				
Yes 🗌	No If yes, why?					_
Have you previous	ly worked for Childhaven?	Yes No	Р	osition Held:		
Dates Employed: F	rom	То		eason for Leaving:		
Dates	Name/Address O	f Employer	Position Held/ Supervisor	Salary/Wages	Major Duties	Reason For Leaving
From:	Name			Starting		J
Mo Yr	Address	City		Final		
To:	Chaba	Phone		Final		
Mo Yr	State	Phone				
From: /	Name			Starting		
Mo Yr To:	Address	City		Final		
/	State	Phone		1 IIIdi		
Mo Yr	State	Thone				
From: /	Name			Starting		
Mo Yr To:	Address	City		Final		
/	State	Phone		i indi		
Mo Yr	State	Thone				
From: /	Name			Starting		
Mo Yr	Address	City		Final		
To:	Chaba	Phone		Final		
Mo Yr	State	Phone				
From:	Name			Starting		
Mo Yr	Address	City		Final		
To: /						
Mo Yr State Phone						

CHILDHAVEN APPLICATION FOR EMPLOYMENT

EGAL			
Are You A U.S. citizen or do	you have a legal right and r	necessary documents to work in the U.S.?	Yes No
Do you have a valid driver's	license? Yes No	0	
What is your means of trans	portation to work?		
Please check/sign in the app		TOLERANCE FOR ANY CHILD ABUSE O	R NEGLECT
I have NO substa	ntiated referrals to a child pr	otective services agency.	
Signature:		Date: _	
I HAVE had a sub	ostantiated referral to a child	protective services agency.	
Signature:		Date:	
In case of emergency notify	:		
_	Name		
-			
	Address	Phone Number	
I,	st of my knowledge. I under	signed applicant, certify that all the informati stand that omitting requested information or pre-employment evaluation may result in rej	giving false information on my
employment. I authorize th Childhaven and my current/	e release of any information	r/current employers for the purpose of obtai from previous employers or references to Cl erences from any and all claims or liability w ent with Childhaven.	hildhaven. I release and discharge
		earches to include but not limited to the follo tor Vehicle Reports, and the Children, Youth	
		d former employers from any and all claims ation for employment with CHILDHAVEN.	and liability which may arise from
Signature of Applicant			Date