

NAZARETH CHILDRENS HOME
Application for Employment

Position Applied For: _____

Personal Information

Name: _____

Address: _____ City: _____

State: _____ Zip: _____

Telephone (Home): _____ (Work): _____

(Cell): _____

Have you ever been convicted of a misdemeanor or felony? Yes No

If yes, please explain. _____

Have you ever had a substantiated report of child abuse/neglect or been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor? Yes No

If Yes, please explain. _____

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

Have you ever applied for a position at Nazareth Children's Home in the past? Yes No

If yes, when: _____

Date

Position

Have you ever worked for Nazareth Children's Home before? Yes No

If yes, when: _____

Date

Position

Do you have a valid Driver's License? Yes No

Number: _____ State: _____ Expiration Date: _____

Has your driver's license, permit, or privileges ever been suspended, revoked, or cancelled?

Yes No If yes, list state(s), date(s), and reason(s): _____

Are you related by blood, marriage, or law to anyone who works for Nazareth Children's Home?

Yes No

If yes, please provide their name and position. _____

Seeking: Full-time Part-time Temporary

Date available for employment: _____

Have you ever been involuntarily terminated or asked to resign from employment? Yes No
If yes, please provide employer, dates, of employment, position, name of supervisor, and reason for termination/resignation request. _____

Have you ever been counseled, disciplined, terminated, or asked to resign as a result of reported workplace harassment, fighting/assault, violation of safety rules, or other inappropriate condition?
 Yes No

If yes, please provide employer, dates, of employment, position, name of supervisor, and reason for termination/resignation request.

Education

	HIGH SCHOOL	UNDERGRADUATE COLLEGE/ UNIVERSITY	GRADUATE
School Name & Location			
Years Completed	9 10 11 12		
Did you Graduate?			
Diploma/Degree			
Major			
Minor			

Are you currently enrolled in an education program? Yes No
If yes, please list the school, location and name of the program.

Please list any specialized trainings and seminars you have completed in the past five years.

Employment History

(Begin with most recent)

Employer: _____ Telephone Number: _____

Address: _____

Dates Employed: From _____ To _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

Employer: _____ Telephone Number: _____

Address: _____

Dates Employed: From _____ To _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

Employer: _____ Telephone Number: _____

Address: _____

Dates Employed: From _____ To _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

Employer: _____ Telephone Number: _____

Address: _____

Dates Employed: From _____ To _____

Job Title: _____ Supervisor: _____

Work Performed: _____

Reason for Leaving: _____

References

**Do not list relatives or domestic partners.*

**Please list at least one professional reference.*

Name: _____ Occupation: _____

Complete Address: _____

Phone Number: _____ Years Known: _____

Name: _____ Occupation: _____

Complete Address: _____

Phone Number: _____ Years Known: _____

Name: _____ Occupation: _____

Complete Address: _____

Phone Number: _____ Years Known: _____

Authorization Statements

I understand and agree that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer’s service if I am employed. Furthermore, I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at anytime, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make an assurance to the contrary.

I give the Employer the right to investigation all references and to contact previous employers if deemed necessary.

I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.

The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no questions of this of this application is used for the purpose of limiting or excluding any applicant’s consideration for employment in a basis prohibited by local, state, or federal laws.

I understand that my submission of the application does not guarantee employment.

Signature of Applicant: _____ **Date:** _____