



Application for Employment:

Equal Opportunity Statement: We are an equal opportunity employer. It is our policy not to discriminate on the basis of race, color, marital status, religious belief, sexual orientation, sex, age, national origin, weight, physical or mental disability, or veteran status in the hiring, firing, payment or discipline of our employees.

General Information:

Date: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Position Applying For: _____

How did you hear of this opening? _____

When can you start? _____ Desired wage (per hour)? _____

Are you a US citizen or otherwise authorized to work in the US on an unrestricted basis? _____

Are you looking for full-time employment? _____ If not, what is your availability? _____

Background Information:

Have you ever been convicted of a crime? _____

(Note: Affirmative answers to this question may not automatically preclude you from consideration for employment)

If yes, please explain: _____

Have you ever been administratively determined by a federal, state or local government agency to have committed abuse or neglect? _____

If yes, please explain: _____

Are you on court supervised probation or parole? _____

If yes, please explain: _____

Have charges been substantiated against you for abuse, neglect, exploitation, mishandling client funds or any other recipient rights violations in an investigation by:

- Department of Commerce/Department of Consumer and Industry Services _____
- Department of Social Services/Family Independence Agency _____
- A local Community Mental Health Recipient Rights Office _____
- Any other recipient rights office: _____

If yes to any of the above, please explain: _____

Have you been employed by this organization before? _____

If yes, please give dates of employment and reason employment was terminated: _____

Educational Experience:

Type of School	Name of School	Location	Dates Attended	Major/Degree, if applicable	Did you graduate?
<u>High School:</u>					
<u>College:</u>					
<u>Business or Trade School:</u>					

Work Experience:

Please list your work experience for the past five years, beginning with the most recent. Please attach additional sheets if needed.

Company Name: _____

Address: _____

Date Started: _____ Starting Wage/Salary: _____ Starting Position: _____

Date Ended: _____ Ending Wage/Salary: _____ Ending Position: _____

Name of Supervisor: _____

May we contact them? _____ If so, please provide their phone number: _____

Responsibilities: _____

Reason for leaving: _____

Company Name: _____

Address: _____

Date Started: _____ Starting Wage/Salary: _____ Starting Position: _____

Date Ended: _____ Ending Wage/Salary: _____ Ending Position: _____

Name of Supervisor: _____

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Responsibilities: _____

Reason for leaving: _____

References:

Please provide a minimum of two personal and two professional references.

Personal References—

Name Address Phone Number

Professional References—

Name Address Phone Number

Application Certification:

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. ALCC is hereby authorized to make any investigation of my prior educational or employment history.

I understand that employment at ALCC is “at will.” This means that either I or ALCC can terminate the employment relationship at any time and for any reason not prohibited by statute. All employment is continued on that basis.

I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature: _____ Date: _____