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# Employment Application

## Applicant Information

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| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Driver’s license #: |  | Social Security #.: |  | Desired Salary: |  |

|  |  |
| --- | --- |
| Position Applied for: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you a citizen of the United States? | YES | NO | If no, are you authorized to work in the U.S.? | YES | NO |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you ever worked for this company? | YES | NO | If yes, when? |  |

## Education

|  |  |  |  |
| --- | --- | --- | --- |
| High School: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Diploma: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Degree: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Other: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Degree: |  |

## Previous Employment

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Company: |  | | | Phone: |  | |
| Address: |  | | | Supervisor: |  | |
| Job Title: |  |  |  |  | |  |
|  |  |  |  |  | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | | | YES | | NO |  | | |
| Company: |  | | | | | Phone: |  | |
| Address: |  | | | | | Supervisor: |  | |
| Job Title: |  |  | |  | |  | |  |
|  |  |  | |  | |  | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | | | YES | | NO |  | | |
| Company: |  | | | | | Phone: |  | |
| Address: |  | | | | | Supervisor: |  | |
| Job Title: |  |  | |  | |  | |  |
|  |  |  | |  | |  | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES | NO |  |

## References

Please list three professional references.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
|  |

## Experience

Describe experience or abilities you have that would help you in working with victims of Domestic Violence and/ or Sexual Assault:

## Background Questions

Have you ever been convicted, or pled guilty or no contest to a felony offence?

|  |  |  |
| --- | --- | --- |
| YES | NO |  |

If Yes, Please Explain

Have you ever been convicted, or pled guilty or no contest to Abuse or Molestation Charges?

|  |  |  |
| --- | --- | --- |
| YES | NO |  |

If Yes, Please Explain

******

**Background Verification Release Form**

**AGENCY INFORMATION**

|  |  |  |
| --- | --- | --- |
| Date | Agency Name  Safe Place, Inc. | |
| Contact Name  Administration Safe Place, Inc | | |
| Agency’s Main Phone Number  806-935-7585 | | Agency’s Fax Number  806-934-1143 |

**APPLICANT INFORMATION:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicant Full Name (Last, First, MI) | | | | Maiden or Other Name(s) Used | |
| Current Address | | | | | |
| City State Zip Code | | | | | County |
| Social Security Number | | Date of Birth | Driver’s License Number | | State Issued |
| Position Applied For | | | | | |
| Gender | ❑ Male ❑ Female | **Race**  ❑ African American ❑ American Indian ❑ Anglo ❑ Asian ❑ Hispanic ❑ Other | | | |

I hereby authorize veriFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge veriFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to veriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | Applicant’s Signature |  | Date |
|  |  |
|  | Applicant’s Printed Name |  | Parent/Guardian’s Signature  (if under 18 years of age) |

## Convictions That Automatic Bars to Employment

Safe Place, Inc. will not offer employment to, and will immediately discharge, any person convicted of, or having pled guilty or “No Contest” to one or more of the following, or if there is any other conviction on that person’s record that is determined to be a contradiction to the Agency Purpose and Direction.

Homicide, Kidnapping, Indecency with a Child, Sexual Assault, Aggravated Assault, Injury to a Child, Elderly, or Disabled Individual, Aiding a Suicide, Agreement to Abduct from Custody, Human Trafficking, Arson, Robbery or any other conviction that is deemed to not be suitable for the for employment at Safe Place, Inc.

## Drug Testing / Criminal Background Check/ Reference Check

As a condition of employment, after you have accepted a job offer, you could be required to submit to a drug / alcohol detection screening. Applicants who test positive for the presence of drugs or alcohol will not be hired. A criminal background check will also be conducted as a condition of employment. Person convicted of crimes against a person or and other conviction that is determined to be a contradiction to the employment will not be hired. All information obtained in the employment screening process will be kept confidential and findings will not be discussed with anyone other than those who have need to know.

References will be checked on all applicants considered for positions with Safe Place, Inc. The supervisor responsible for hiring the position will check these references. Information requested from references will be based on the tasks in the job description.

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I give my permission for Safe Place, Inc to perform a background check which is mandatory for employment of any position at Safe Place, Inc.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

## Documentation

Please attach resume or any other supporting documentation to this application

## For Employer Purpose Only

Referenced Checked: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Background Check: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Hire: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APRROVED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_