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| --- | --- |
|  | Employment ApplicationPlease fill out this application, save it to your computer, and then submit the saved file through our website form. www.amilliondreamslc.org/staff-page |

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: | First Name | Last Name | MI. | Date: | Enter a date. |

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| --- | --- | --- |
| Address: | Click or tap here to enter text. | Enter text. |
|  | Street Address | Apartment/Unit # |

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| --- | --- | --- | --- |
|  | Click or tap here to enter text. | Enter text. | Enter text. |
|  | City | State | ZIP Code |
|  | Click or tap here to enter text. |  |  |
|  | Resident School District |  |  |

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| --- | --- | --- | --- |
| Phone: | Enter text. | Email | Click or tap here to enter text. |

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| --- | --- | --- | --- | --- | --- |
| Date Available: | enter a date. | Social Security No.: | Enter text. | Desired Salary: | $Enter text. |

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| --- | --- | --- | --- |
| Position Applied for: | Click or tap here to enter text. | Full Time[ ]  | Part Time[ ]  |

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

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| --- | --- | --- | --- | --- |
| Have you ever worked for this company? | YES[ ]  | NO[ ]  | If yes, when? | Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever been convicted of a felony? | YES[ ]  | NO[ ]  |  |

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| --- | --- |
| If yes, explain: | Click or tap here to enter text. |

## Education

|  |  |  |  |
| --- | --- | --- | --- |
| High School: | Click or tap here to enter text. | Address: | Click or tap here to enter text. |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: | Enter a date. | To: | Enter a date. | Did you graduate? | YES[ ]  | NO[ ]  | Diploma: | Click or tap here to enter text. |

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| --- | --- | --- | --- |
| College: | Click or tap here to enter text. | Address: | Click or tap here to enter text. |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: | Enter a date. | To: | Enter a date. | Did you graduate? | YES[ ]  | NO[ ]  | Degree: | Click or tap here to enter text. |

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| --- | --- | --- | --- |
| Other: | Click or tap here to enter text. | Address: | Click or tap here to enter text. |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: | Enter a date. | To: | Enter a date. | Did you graduate? | YES[ ]  | NO[ ]  | Degree: | Click or tap here to enter text. |
|  |  |  |  |  |  |  |  |  |
| Please List any other Certificates or trainings that you currently hold: |
| Click or tap here to enter text. |

## References

Please list three professional references.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: | Click or tap here to enter text. | Relationship: | Enter text. |
| Company: | Click or tap here to enter text. | Phone: | Enter text. |
| Address: | Click or tap here to enter text. |  |  |
|  |  |  |  |
| Full Name: | Click or tap here to enter text. | Relationship: | Enter text. |
| Company: | Click or tap here to enter text. | Phone: | Enter text. |
| Address: | Click or tap here to enter text. |  |  |
|  |  |  |  |
| Full Name: | Click or tap here to enter text. | Relationship: | Enter text. |
| Company: | Click or tap here to enter text. | Phone: | Enter text. |
| Address: | Click or tap here to enter text. |  |  |

## Previous Employment

|  |  |  |  |
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| Company: | Click or tap here to enter text. | Phone: | Enter text. |
| Address: | Click or tap here to enter text. | Supervisor: | Enter text. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: | Enter text. | Starting Salary: | $Enter text. | Ending Salary: | $Enter text. |

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| --- | --- |
| Responsibilities: | Click or tap here to enter text. |

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| From: | Enter a date. | To: | Enter text. | Reason for Leaving: | Click or tap here to enter text. |

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| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
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| --- | --- | --- | --- |
| Company: | Click or tap here to enter text. | Phone: | Enter text. |
| Address: | Click or tap here to enter text. | Supervisor: | Enter text. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: | Enter text. | Starting Salary: | $Enter text. | Ending Salary: | $Enter text. |

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| --- | --- |
| Responsibilities: | Click or tap here to enter text. |

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| --- | --- | --- | --- | --- | --- |
| From: | Enter a date. | To: | Enter a date. | Reason for Leaving: | Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|  |  |  |  |
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|  |  |  |  |
| --- | --- | --- | --- |
| Company: | Click or tap here to enter text. | Phone: | Enter text. |
| Address: | Click or tap here to enter text. | Supervisor: | Enter text. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: | Enter text. | Starting Salary: | $Enter text. | Ending Salary: | $Enter text. |

|  |  |
| --- | --- |
| Responsibilities: | Click or tap here to enter text. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: | Enter a date. | To: | Enter a date. | Reason for Leaving: | Click or tap here to enter text. |

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

## Military Service

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Branch: | Click or tap here to enter text. | From: | Enter a date. | To: | Enter a date. |

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| --- | --- | --- | --- |
| Rank at Discharge: | Click or tap here to enter text. | Type of Discharge: | Click or tap here to enter text. |

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| If other than honorable, explain: | Click or tap here to enter text. |

## Disclaimer and Signature

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

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: | Enter a date. |

## For Office Use ONLY

|  |  |  |
| --- | --- | --- |
| Account Created in Ohio Professional Registry | YES[ ]  | NO[ ]  |
| Proof of High School graduation | YES[ ]  | NO[ ]  |
| Completed Medical Statement | YES[ ]  | NO[ ]  |
| Drug Screening | YES[ ]  | NO[ ]  |
| BCI & FBI Background Check | YES[ ]  | NO[ ]  |
| Orientation Training | YES[ ]  | NO[ ]  |
| First Aid & CPR Training | YES[ ]  | NO[ ]  |
| Communicable Disease Training | YES[ ]  | NO[ ]  |
| Child Abuse Training | YES[ ]  | NO[ ]  |