# **Directions for Youth & Families, Inc.**

### **Employment** Application

It is the policy of Directions for Youth & Families, Inc. to provide a harassment-free and equal employment opportunity work environment for all applicants and employees. Directions for Youth & Families is committed to complying with all applicable federal, state, and local regulations which provide protection from discrimination for various groups of applicants and employees.

Directions for Youth & Families maintains a Code of Ethics and specific policies regarding employee and applicant honesty, performance, conduct and attendance. Additionally, Directions for Youth & Families reserves the right to investigate any suspected unethical or illegal activities and any violation of the policies including, but not limited to, misappropriation of funds, falsification of records, the use, sale or possession of alcohol or drugs with working or working under the influence of drugs or alcohol, unexcused absences, and the like. Violations of the policies will result in disciplinary actions by Directions for Youth & Families, which could include termination and prosecution. THE EMPLOYMENT RELATIONSHIP AT DIRECTIONS FOR YOUTH & FAMILIES IS AT WILL, AND EMPLOYMENT CAN BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE OR NOTICE AT THE OPTION OF EITHER DIRECTIONS FOR YOUTH & FAMILIES, OR THE EMPLOYEE. Questions about these polices may be addressed to the CEO of Directions for Youth & Families. Please answer all questions completely and accurately. Incomplete applications may be rejected.

Name (Last, First, Middle)		Home/Business Phone	Current Date	
Present Address (Street, City, State, Zip Code)		Email Address		
If you have lived at the above address fo	r less than six months. list your previous	address		
,				
Are you currently legally eligible (by reason of citizenship or legal alien status) for employment in the United States?				
Is your residency in the U.S. based on a s	student visa? 🛛 🗆 Yes 🗆 N	No (Proof of citizenship or immigration	on status will be required upon employment)	
Will you require employer sponsorship in order to remain eligible for work in the United States?				
Social Security Number	Have you ever worked under a differen	t last name than currently used?	🗆 Yes 🗆 No	
	If yes, provide name:			
If you are under 19 years of are, do you b		Date of Birth: (mm/dd/yyyy)		
If you are under 18 years of age, do you h				
Have you ever applied for employment at Directions for Youth & Families?  Yes  No				
Have you ever been employed by Direction	ons for Youth & Families?	If yes, give dates of employment	Position(s) Held?	
$\Box \text{ Yes } \Box \text{ No}$				
Are you related to anyone at Directions for		If yes, give name	Relationship to you	
	🗆 Yes 🗆 No			
How were you referred to Directions for Y	outh & Families?			
Have you ever been convicted of a criminal offense, or participated in a pre-trial deferral or diversion program?				
Falsification, misrepresentation and/or omission of criminal conviction are grounds for refusal to hire, or if hired, for dismissal. (Note: A conviction does not automatically disqualify an applicant from employment. The date, nature and seriousness of the offense will be considered.) If answer is yes, indicate date(s) of conviction and the type(s) of offense(s); include those matters for which you may have plead guilty, no contest, or participated in a pre-trial diversion program.:				
Should you have a criminal conviction or a pending charge, Directions for Youth & Families may be required to suspend or terminate your employment. Additionally, Directions for Youth & Families requires background investigations regarding criminal records of our employees. If you have any concerns with regard to these matters, our preference is to discuss them prior to employment. Omission of information deemed material by Directions for Youth & Families will be considered a willful misstatement and may be grounds for immediate termination of the application process, or of employment by Directions for Youth & Families.				

Position Applied For	□ Full Time	Part Time	□ Summer	□ Limited Term – Less than 1,000 hours
Salary Requirements (please specify)	Available Employn	nent Date		How many hours per week do you prefer?
Would you be willing to work additional hours?	Are there any limit	ations on your working	) hours? □ Ye	s 🗆 No
	If yes, please explain			
Are you aware of any circumstances, legal or otherwise, excluding medical conditions, which may limit the length of your employment?				

#### If yes, please explain

High School Name	Did you graduate? □	Yes 🗆 No	
Address (Street, City, State, Zip Code)	Course of Study		
Name of College Attended	Dates Attended	Overall GPA	Major GPA
Address (Street, City, State, Zip Code)	Name of Degree	Date Degree Obta	ained
Name of College Attended	Dates Attended	Overall GPA	Major GPA
Address (Street, City, State, Zip Code)	Name of Degree	Date Degree Obta	ained

Extracurricular activities: (You may exclude any organization in which the name of character of the organization indicates the race, color, religion, national origin, sex, veteran status, ancestry, age, disability, marital status, or any other classification protected by federal, state or local law.)

Honors and achievements:

Courses taken that may be applicable to the position for which you are applying:

Additional interests, skills, or qualifications, that you possess that you feel qualify you for the position for which you are applying:

Are you fluent in any other languages?

Have you ever been	suspended or placed on probation for attendance?		
🗆 Yes 🗆 No	If yes, please explain		
Do you have any part-time or full-time jobs that you would expect to continue during your employment here?			
🗆 Yes 🗆 No	If yes, please explain		
Do you have a valid driver's license?			
□ Yes □ No	State of issuance: Driver's License #:		
Do you have any driving violations? □ Yes □ No			
If answer is yes, indicate date(s) of event and the type(s) of offense(s); include those matters for which you may have plead guilty, no contest.			

### **Prior Employer**

Please list all jobs held within the last ten (10) years, beginning with your present or most recent job. Include all self-employment, voluntary work, job-related military work experience, summer and part-time jobs. PLEASE ADD AN ADDITIONAL SHEET IF NECESSARY.

Employer	Type of Business	Telephone #
Address (Street, City, State, Zip Code)	Dates Employed from to	
Salary	Title of Position Held	
Beginning \$ Ending \$	□ F/T □ P/T □ Temp	.
Description of work		
Reason for Leaving		
Were you involuntarily terminated from this position?		ontact this employer?  Yes No
Employer	Type of Business	Telephone #
Address (Street, City, State, Zip Code)		Dates Employed from to
Salary	Title of Position Held	Supervisor's Name
Beginning \$ Ending \$		
Description of work	□ F/T □ P/T □ Temp	
Reason for leaving		
Were you involuntarily terminated for this position?		ontact this employer?  Yes No
Employer	Type of Business	Telephone #
Address (Street, City, State, Zip Code)		Dates Employed           from to
Salary	Title of Position Held	Supervisor's Name
eginning \$ Ending \$		
Description of work	□ F/T □ P/T □ Temp	
Reason for leaving		
-		
Were you involuntarily terminated from this position?	□ No Do you authorize us to c	ontact this employer? 🗆 Yes 🛛 No
		Telephone #:
· · · · · · · · · · · · · · · · · · ·		
Address (Street, City State, Zip Code)		Employment Date:
		from to
Salary: Begin: \$ Ending: \$ Posit	ion held:	Supervisor's Name:
□ F/	/T 🗆 P/T 🗆 Temp	
Description of Work:		
Reason for leaving:		
Were you involuntarily terminated from this position?	□ No Do you authorize us to co	ontact this employer?

### Acknowledgment

Please read carefully. If you have any questions regarding these statements, please discuss them with the HR Manager before signing at the bottom of the page.

I understand that Directions for Youth & Families requires me to undergo background checks in order to verify any criminal conviction I may have.

I certify that the information in this application is correct and complete. I understand that if offered employment, my employment is contingent on completing all aspects of the pre-employment and reference checking processes.

Applicant's Signature

Date

## **Directions for Youth & Families, Inc.**

### **REFERENCE VERIFICATION AUTHORIZATION**

I hereby authorize any of the persons or organizations referenced in this application and/or accompanying resume to give **Directions for Youth & Families** or its agents any and all information concerning my previous employment, education, or any other information that they may have, with regard to any of the subjects covered by this application and release all such parties from all liability for any damage that may result from furnishing such information to them. This authorization does not include release, or other prohibited use, of disability and medical related information prohibited in pre-employment inquiries by the Americans with Disabilities Act (ADA). I understand that an investigative criminal background check may be made by **Directions for Youth & Families** or through an Investigative Agency. I authorize **Directions for Youth & Families** to request such information unless otherwise indicated in the employment section of this application.

In order to assure the integrity of the verification process, I am voluntarily providing my:

Birth Month \_\_\_\_\_

Birth Day \_\_\_\_\_

Applicant's Printed Name

Applicant's Signature

Date

## **Directions for Youth & Families, Inc.**

Provide Three (3) Professional References (This should include prior managers or supervisors)

Name:	
Organization:	
Relationship:	
Address:	
City, State Zip:	
Telephone number: ()	
Email Address:	
Name:	
Organization:	
Relationship:	Years Known:
Address:	
City, State Zip:	
Telephone number: ()	
Email Address:	
Name:	
Organization:	
Relationship:	Years Known:
Address:	
City, State Zip:	
Telephone number: ()	
Email Address:	

### *VOLUNTARY SELF-IDENTIFICATION* (CONFIDENTIAL – FOR STATISTICAL USE ONLY)

We are an Equal Opportunity employer and do not discriminate on the basis of race, color, religion, sex, age national origin, disability, veteran status, or any other classification protected by Federal, State, or Local law. The information below will be used in compilation of the data for Affirmative Action reporting.

Completion of the data is voluntary and will not affect your opportunity for employment or terms or conditions of employment, if hired. Identification can be declared at any time prior to, or if applicable, after hire. Please return this page with your application.

#### **Please complete in full:**

Date:		Position A	Applied For:
Name: Social Securi			curity #:
Sex: (circle one)	Male	Female	
Date of Birth:			_
Applicant's Zip Code:			_
Ethnic Group (Please check one of th	e descriptions bel	ow corresponding to	the ethnic group with which you most identify)
American In	dian or Alaskan N	lative	□ Asian
□ Black or Afr	ican American		□ Native Hawaiian or Other Pacific Islander
□ White			□ Hispanic or Latino (all races)

 $\Box$  Race missing or unknown – applies to applicants only, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

#### Veteran status

(Please check one if it describes your Veteran status (post hire only).

□ Special Disabled Veteran

□ Vietnam Era Veteran

\*Veteran status may be requested only after post-offer is made

#### Personal and Confidential

## This page contains sensitive information, store in secure "Affirmative Action Forms" file, separate from personnel records.