



Employment Application

Hope Hill Children's Home

Family Connection, Inc. is an equal opportunity employer. It is our policy that all applicants be considered solely on the basis of qualifications and ability, without regard to race, religion, color, sex, age, national origin, disability or veteran status.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: () _____ E-mail Address: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	_____	
Have you ever been convicted of a felony? If yes, explain:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____		
Are you 21 years or older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

Education

High School: _____ Complete Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Complete Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Complete Address: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____

Special Skills: _____

Activities(exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color or nation or origin of it's members):

References

Please list three persons not related to you, whom you have known at least one year.

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____ City: _____ State: _____ Zip: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Previous Employment

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

In Case of Emergency Notify

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Disclaimer and Signature

I certify that all information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, has any authority to enter into an agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

Signature: _____ Date: _____

Have you signed the attached and required
Pre-employment agreement?

YES

NO