1825 E. Bankhead Drive • Weatherford, Texas 76086 • (817) 594-4465

## **STAFF APPLICATION**

This application form is intended for use in evaluating your suitability for employment with this agency. It is not an employment contract or a guarantee of employment. Please answer all questions completely. We will consider all qualified applicants without regard to sex, race, color, age, national origin, disability or veteran status. Please print. Use additional pages if needed.

Applying for the position of				
1	PERSONAL	INFORMAT	ION	
Last Name	First			Middle Initial
Social Security #//				
Street Address				
City				Zip
Length at present address years				
Prior Address				
City				Zip
Length at prior address years				
Phone number ()				
* I am 18 years of age or older  Y	YES □ NO			
Referred by: advertisement friend relative employment agency other				
	<b>EDU</b>	CATION		
Indicate the highest grade level compleschools Name			11 12 13+ <b>Date attended*</b>	Graduate?
Schools Name	City	State	Date attended	☐ Yes
				□ No □ Yes
				□ No
				☐ Yes
				□ No □ Yes
				□ No
List any Honors received				

\*The Age Discrimination in Employment Act prohibits discrimination of the basis of age against employees and applicants for employment who are 40 years of age or older.

J(	DB RELATED SKILLS
Are you fluent in English? ☐ YES	□NO
Spanish? □ YES	□NO
Other languages? $\square$ YES	□NO
Valid Driver's License(s)? ☐ YES	□NO
Driver's License information:	
StateNumber	TypeExpiration Date
Describe specialized training, apprenticesh and/or CPR).	TypeExpiration Dateip, skills and extra-curricular activities (excluding first aid training
Are you certified in? ☐ First Aid ☐ CF Certifying Agency(ies) Date(s) Certi	
List professional trade, business or civic ac	ctivities and offices held.
	CECHDITY
In which states have you lived in the new	SECURITY out 10 years?
	st 10 years?
application? □ YES □ NO	urity numbers other than those listed on the first page of this
Are you currently under indictment for, commission of a felony or misdemeanor?	or has an official criminal complaint been filed against you, alleging
If so describe Date City/State Charg	
	MILITARY
Have you ever served in the military?	□ YES □ NO
70 7 1 07 5111	
Date* entered Date* disch	arged
Final rank Type discha	nrge
*The Age Discrimination in Employment Act prohibe employment who are 40 years of age or older.	bits discrimination of the basis of age against employees and applicants for

# **HEALTH**

Are you able to perform the dution of YES □ NO	es of the job(s) for whic	ch you are applying, with or	without accommodation?
Accommodation needed			
		AVAILABILITY	
Date you can start IMMEI			Date
Date you can startIMMEI I can workFull time	Part time?Tempo	orarySummer?	<del></del>
Are you available to work:			
Overtime if required?	□ YES □ NO		
Weekdays?	☐ YES ☐ NO		
Saturdays?	☐ YES ☐ NO		
Sundays?	□ YES □ NO		
Can you travel?	☐ YES ☐ NO		
	<b>EMPLOYME</b>	NT HISTORY	
Have you ever applied to this Ag	gency before?	☐ YES ☐ NO	
If so, when?			
Have you ever been employed by			
If so, when?			
Are you related to any current er			
If so, whom?			
	FORMER E	MPLOYERS	
List all employers you have h Include part-time and temporary Continue on additional sheet of p you indicate those you do not wa please state why.	ad in the last 10 years, s employment and milita paper if necessary. The	starting with the current or a ry service. Account for all Agency will contact the em	periods of inactivity. ployers listed below unless
Current Employer			
Company Name			
Company Address			
City			Zip
Supervisors Name			
Position	Duti		
Employment Start date	Emp	oloyment End date	
Reason for leaving			
☐ YES, you may contact this employ	er about my qualifications a	nd references.	
□ NO, please do not contact this emp	• •		
1.0, preude de not contact uns emp			

# Previous Employer 1 Company Name \_\_\_\_\_ Company Address City State Zip \_\_\_\_ Phone # Supervisors Name Position \_\_\_\_Duties \_\_\_\_ Employment Start date \_\_\_\_\_Employment End date \_\_\_\_\_ Reason for leaving \_\_\_\_\_ ☐ YES, you may contact this employer about my qualifications and references. □ NO, please do not contact this employer because: Past Employer 2 Company Name Company Address \_\_\_\_\_ State Zip \_\_\_\_\_ Phone # Supervisors Name \_\_\_\_\_Duties \_\_\_\_\_ Employment Start date Employment End date Reason for leaving \_\_\_\_\_ ☐ YES, you may contact this employer about my qualifications and references. NO, please do not contact this employer because: Past Employer 3 Company Name Company Address State Zip City Supervisors Name \_\_\_\_\_ Phone # Position \_\_\_\_\_Duties Employment Start date \_\_\_\_\_ Employment End date \_\_\_\_ Reason for leaving ☐ YES, you may contact this employer about my qualifications and references. NO, please do not contact this employer because: Past Employer 4 Company Name Company Address \_\_\_\_\_State\_\_\_\_\_Zip \_\_\_\_

Position

Supervisors Name

\_\_\_\_\_Duties \_\_\_\_\_

Employment Start date Employment End date

Phone #

Reason for leaving			
☐ YES, you may contact this employer at	bout my qualifications and references.		
☐ NO, please do not contact this employe	er because:		
Past Employer 5			
Company Name			
	State		
Supervisors Name	Phone #		
Position	Duties		
Employment Start date	Employment End date		
Reason for leaving			
☐ YES, you may contact this employer ab	out my qualifications and references.		
☐ NO, please do not contact this employe	er because:		
Occupation/Employer			
City	State_	Zip	
Best contact Phone#	Years	Known	
<b>Employment Reference 2.</b>			
Name			
Address			
City	State	Zip	
Best contact Phone#	Years	Years Known	
<b>Employment Reference 3.</b>			
Name			
Occupation/Employer			
City		Zip	
Best contact Phone#	Years	Known	

## PERSONAL REFERENCES

You must provide at least three personal references. Do not include relatives or employers.

Personal Reference 1.

reisonal Reference 1.			
Name			
Occupation/Employer			
Home Address			
City		Zip	
		Years Known	
Personal Reference 2.			
Name			
Occupation/Employer			
Home Address			
City		Zip	
Best contact Phone#			
Personal Reference 3.			
Name			
Occupation/Employer			
Home Address			
City			
Best contact Phone#			
of any kind whatsoever. I understand that if I a statements made on the application form or any I hereby authorize the Texas Pythian Home investigate my employment history, character at their revealing any and all information they wi my right to bring any cause of action against the reason because of their statements.  I agree that, if I am employed, I will abide be understand that the taking of drug and alcohol continued employment and refusal to take such I further understand that nobody in the Texas employment contracts with me for any definite Pythian Home Board. I also understand that me by the Texas Pythian Home at any time for any	to contact any company or individual and qualifications and I give my full as sh as a result of this investigation. In a nese individuals for defamation, invasion and I give my full as the second of the T tests, when given pursuant to company in tests when asked will be grounds for as Pythian Home is authorized to enter the period of time without the express with the expression of the T tests when asked will be grounds for as Pythian Home is authorized to enter the period of time without the express with the expression of the T tests when asked will be grounds for the period of time without the express with the expression of the T tests when asked will be grounds for the period of time without the express with the period of the period of time without the expression of the T tests when asked will be grounds for the period of time without the expression of the T tests when asked will be grounds for the period of time without the expression of the T tests when asked will be grounds for the tests when the tests when asked will be grounds for the tests when the te	it deems necessary to addition, I hereby waive on of privacy or any other rexas Pythian Home. It y policy, are a condition of my immediate termination into any written or verbal retten consent of the Texas e terminated by myself or thout prior cause.	
I further understand that prior to employment information may be cause for my dismissal.  I understand a TB (tuberculosis) test is requ			
•			
Applicant Signature			
Print Name	email form to: <mark>lv</mark>	vatson@pythianhome.org	