



147 Coxe Avenue  
Asheville, NC 28801  
T: 828-254-9917  
F: 828-251-5373

## APPLICANT INFORMATION SHEET

Dear Applicant:

Thank you for your interest in Liberty Corner Enterprises, Inc.

This agency takes great pride in its human resources. The staff that provide supports to individuals with developmental disabilities and mental illness in our community are our most valuable assets. Without them, we have no services to provide.

We have made significant efforts to assure our staff receives support, education, training, supervision, and opportunities for learning self-improvement, development, advancement and promotion. It is our belief that quality services come only from quality staff. We can have quality staff if we begin by hiring the right people, therefore the hiring process at Liberty Corner Enterprises is thorough, intensive and probably more rigorous than what you may have encountered at other agencies and businesses.

### STEPS OF THE HIRING PROCESS:

- **You must be 18 years or older and have a High School Diploma or GED to be hired at LCE. You are also required to have a current NC Driver's License.**
  1. **Fill out the attached application, being sure to complete both sides of all pages, answer questions, and fill in all blanks. If your application is INCOMPLETE, we will be unable to consider it. Turn in your completed application to the administrative assistant at the front desk.**
  2. **The Staff Coordinator will screen your application. Your previous or current employer(s) and the references you listed will be contacted (unless you indicate you do not want us to contact them).**
  3. **If your application passes the initial screening process and reference checks, you will be contacted for an interview.**
  4. **Two or more staff from Liberty Corner Enterprises may conduct your interview. The staff that completes your interview will pass along their recommendations to the Supervisor(s) who have job vacancies.**
  5. **You may be contacted by a supervisor for an additional interview with staff and individuals receiving supports, and then you may be offered a position.**

(Continued on back)

6. **You will make an appointment with our Staff Coordinator and you will need to bring the following:**
  - a) **Your North Carolina driver's license**
  - b) **Your Social Security card or birth certificate**
  - c) **Proof of vehicle insurance**
  - d) **High School Diploma or GED**

**This employer participates in E-Verify. The employer will provide the Social Security Administration and, if necessary, the Department of Homeland Security with information from each new employee's Form I-9 to confirm work authorization.**



**LIBERTY CORNER ENTERPRISES, INC.**  
**147 Coxe Ave.**  
**Asheville, NC 28801**  
**(828) 254-9917 Fax (828) 251-5373**

APPLICATION FOR EMPLOYMENT

We are an Equal Opportunity Employment Company. We are dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, national origin, or physical disability.

**PLEASE PRINT LEGIBLY. Complete all blanks- if incomplete, your application will not be processed.**

DATE OF APPLICATION \_\_\_\_\_ DATE AVAILABLE FOR WORK: \_\_\_\_\_

NAME (last, first, middle): \_\_\_\_\_

ADDRESS WHERE YOU CAN BE REACHED (number, street, city, zip): \_\_\_\_\_

DO HAVE A CURRENT NC DRIVERS LICENSE?  YES  NO WILL YOU HAVE USE OF A VEHICLE FOR WORK?  YES  NO

TELEPHONE WHERE YOU CAN BE REACHED \_\_\_\_\_ POSITION APPLIED FOR \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ REFERRED BY: \_\_\_\_\_

ARE YOU 18 YEARS OF AGE OR OLDER? YES NO (if not, DOB: \_\_\_\_\_)

HAVE YOU EVER BEEN EMPLOYED BY LCE BEFORE? YES Give Date: \_\_\_\_\_ NO

\*\*\*\*\*  
 Military Service: YES NO RANK: \_\_\_\_\_ CURRENTLY NAT'L GUARD: YES NO

Have you been a resident of North Carolina for 5 or more years? YES NO

\*\*\*\*\*

EDUCATION

CIRCLE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4 Graduate School 1 2 3 4

Name and Location	Years attended	Graduated	Subject studied	Degree Received
-------------------	----------------	-----------	-----------------	-----------------

High School \_\_\_\_\_

College/University \_\_\_\_\_

Graduate/Professional \_\_\_\_\_

Other Education/Trade/Business \_\_\_\_\_

Special Training Programs/ Seminars/ Subjects of Special Study or Research Completed: \_\_\_\_\_

Activities (other than religious) civic, athletic, fraternal, etc. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do not list names or descriptions of organizations that might indicate race, creed, color, national origin, religion, sex or physical disability of its members.

\*\*\*\*\*  
**HAVE YOU EVER BEEN CONVICTED OF AN OFFENSE AGAINST THE LAW OTHER THAN A MINOR TRAFFIC VIOLATION?**

YES NO (If yes, explain fully on an additional page).

(Note: A conviction does not mean you cannot be hired. The nature and date of offense will be evaluated in relation to the job for which you are applying).  
\*\*\*\*\*

**WORK HISTORY (Include volunteer experience and use additional pages if necessary. Place an X in the box if you do not want us to contact your current employer.)**

Current Employer: \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Employed from \_\_\_\_\_ to \_\_\_\_\_ Number supervised by you \_\_\_\_\_  
Reason for leaving \_\_\_\_\_ Last Wage \_\_\_\_\_  
Describe duties \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*  
Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Employed from \_\_\_\_\_ to \_\_\_\_\_ Number supervised by you \_\_\_\_\_  
Reason for leaving \_\_\_\_\_ Last Wage \_\_\_\_\_  
Describe title and job duties \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*  
Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Employed from \_\_\_\_\_ to \_\_\_\_\_ Number supervised by you \_\_\_\_\_  
Reason for leaving \_\_\_\_\_ Last Wage \_\_\_\_\_  
Describe title and job duties \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*  
**CHARACTER REFERENCES:** Give the names of at least two persons not related to you who are familiar with your work and have known you for at least one year. These individuals must be able to discuss matters related to your personal character.

---

Name	Address	Business	Phone	Years Acquainted
------	---------	----------	-------	------------------

---

Name	Address	Business	Phone	Years Acquainted
------	---------	----------	-------	------------------

---

Name	Address	Business	Phone	Years Acquainted
------	---------	----------	-------	------------------

APPLICATION FOR EMPLOYMENT, CONTINUED:

**AUTHORIZATION FOR RELEASE OF PERSONAL AND CONFIDENTIAL INFORMATION**

I, \_\_\_\_\_ (print full name), do hereby authorize full disclosure of all records concerning myself to duly authorized representatives of Liberty Corner Enterprises, Inc., for their review, whether said records are of a public, private, or confidential nature.

The intent of this authorization is to give consent for full and complete disclosure of any and all records pertaining to my education, previous employment, criminal background, and any additional information requested for the purpose of completing application for employment or promotion with Liberty Corner Enterprises, Inc.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly upon this authorization, will be considered in determining my suitability for employment/promotion by Liberty Corner Enterprises, Inc. I waive any rights to confidentiality for information about my background, including but not limited to criminal background information (unless such information has been expunged or sealed by the court), education records, and previous employment records, as they relate to determining my suitability for employment/promotion. I certify that any persons who furnish such information concerning me shall not be held accountable for providing this information, and I do hereby release said person(s) from any and all liability that may be incurred as a result of furnishing requested information.

I understand that the disclosure of any offense against the law, excluding minor traffic violation(s), will not result in an automatic disqualification from employment/promotion. The nature of the offense and date of conviction will be evaluated in relation to the job for which I am applying.

I certify that the information, contained in this application is correct to the best of my knowledge. I understand that if I am hired, the rules and regulations of Liberty Corner Enterprises, Inc., and any personnel procedures, do not constitute a contract of employment. I understand that either Liberty Corner Enterprises, Inc. or myself can terminate my employment and compensation, with or without cause, and with or without notice, at any time.

A photocopy of this release form will be as valid as an original, even though said photocopy does not contain any original writing of my signature.

\_\_\_\_\_  
Full Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Social Security Number

Please complete the back of this page.

Have you had any of the following training/experience?

	YES	NO	CURRENT
CPR			
First Aid			
Medication Administration			
Sign Language			
Work experience with DD (Developmental Disabilities, Aging, and Mental Illness) <b>Please explain below</b>			How many years experience?

**Explanation of work experience:**

---



---



---



---



---



---



---



---

**Voluntary Information**

The information in this box is voluntary. Information is requested for federal record keeping purposes only. This information is not used for hiring purposes.

**ETHNICITY/RACE- Please select one or more of the following choices:**

- American Indian
- Asian, not Hispanic or Latino
- Black or African American, not Hispanic or Latino
- Two or More Races, not Hispanic or Latino
- Hispanic or Latino
- Native Hawaiian or Pacific Islander, not Hispanic or Latino
- White or Caucasian, not Hispanic or Latino

**Gender:** -Male Female