



## APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer.  
Reasonable accommodation will be provided as required by law.

Last Name	First Name	Middle Initial	Social Security Number:	
Street Address	City/State	Zip Code	Phone Number:	
Email	Do you have a valid Driver's License? If yes, what is the expiration date?			
If hired, can you provide evidence of legal eligibility to work in the U.S.?		Any offer of employment is conditioned upon completing form I-9 and providing the appropriate documents for identity and work authorization.		
Position Desired:		Desired Salary:	Date you can start?	
<b><u>EDUCATION</u></b>				
Name of high school attended:	City & State	Graduate?	GED?	
Name of college or technical school:	City & State	Graduate?	Degree?	Major:
Graduate School:	City & State	Graduate?	Degree?	
Are you presently enrolled in school?	If yes, give name & address of school and expected degree date:			
List any job-related skills, certifications or accomplishments:				
Are you CPR/ First Aid Certified?		Do you have a Passive Restraint Certificate?		
Are your certified in Medication Management?				



Have you ever been convicted of or incarcerated as a result of a conviction for a Felony or Misdemeanor (*including traffic violations*) during the last five years?  Yes  No

If yes, give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*If you are offered a position, will you sign a permission form allowing Seton Youth Shelters to conduct a Criminal Records Check and a Child Protective Services Check?  Yes  No

\*Do you agree to have your fingerprints taken?  Yes  No

\*Do you agree not to have contact outside your professional relationship with the clients and/or families of Seton Youth Shelters?  Yes  No

\*Do you agree to work varied hours to accommodate the needs of the program?  Yes  No

\*If No what shifts would you work?  Days (8-4)  Evenings (4-12)  Overnights (12-8)

**CAREFULLY READ EACH STATEMENT BEFORE SIGNING AT THE BOTTOM**

I certify that all of the information provided in this employment application is true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background, credit history check, and drug test, as applicable. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employers, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I have read, understand, and agree to the above statements.

Signature:

Date: