

Status _____
1 st Interview: _____
2 nd Interview _____
Initials: _____

EMPLOYMENT APPLICATION

ALL sections must be completed, even if you are attaching a resume.

Today's Date: _____

Name: _____
(First) (Middle) (Last)

Other Name(s) used for school or previous employment records: _____

Address: _____
(Street) (City) (State) (Zip)

Home Telephone No. _____ Other Telephone No. _____

Email Address: _____

Are you eligible to work in the US? Yes No List Visa # if applicable: _____

Are you at least 20 years of age? Yes No

Positions(s) Applied For: 1. _____ 2. _____

Status(s) Applied For: Full Time Part Time On Call

Shift(s) Applied For: Day Evening Overnight

Number of hours available to work per week: _____ Days of the week available to work: S M T W TH F Sat

Have you ever applied at Wedgwood before? Yes No If yes, when? _____

When are you available to begin work? _____

What is your desired starting salary? \$ _____ Minimum Acceptable? \$ _____

Are you able to perform the job functions for which you are applying? Yes No

Explain: _____

How were you made aware of this position? Staff Referral (who) _____

- Advertisement Career/Job Fair College Word of Mouth Walk In Internet Other

GENERAL INFORMATION

EDUCATION/LICENSE

Education

Type of School	Name and Address	Years Completed	Did you Graduate?	Degree Received	Areas of Specialization
High School					
College					
Graduate					
Other					

Note: Verification of Education will be required of all prospective employees.

Professional Licensing

State	Registration Number	Dates	Type

Note: Proof of Professional Registration will be required.

SERVICE

Were you in the US Armed Forces? Yes No

If yes, dates of service: _____ to _____ Branch: _____

Type of Discharge: _____

BACKGROUND INFORMATION

Have you ever been convicted or pled guilty to a crime? Yes No

Do you have any felony charges pending against you? Yes No

If you answered "Yes" to either question, please explain by giving date, court, nature of the offense and circumstances. Such charges, conviction or plea will not necessarily disqualify an applicant from employment:

Have you ever had a complaint filed against you with the Department of Protective and Regulatory Services (Child or Adult Protective Services) in Michigan or any other state? Yes No

If you answered "Yes", please explain: _____

A valid driver's license with no more than 3 moving violations within a 3 year period and no alcohol/drug related violations within a 5 year period is required. Wedgwood Christian Services will conduct a check of your driving record to verify you meet these requirements.

Do you meet these requirements as they pertain to your driving record? Yes No

Explain: _____

Driver's License Number _____ Issuing State _____

Have you lived out of state? _____ If so, indicate which states and the dates that you lived there. _____

Note: A criminal History Check, Sex Offender Registry Check and Central Abuse Registry Check will be completed in all the states you have lived in.

Begin with your present or most recent employment.

Include self-employment, summer or part-time jobs, and military service assignments for the past 8 years. Use additional pages if needed.

EMPLOYMENT

Employer		Dates of Employment (State Month & Year)		Position Held (List Title/Major Responsibilities)	Reason for Leaving
Name/Address		From	To	Did you voluntarily resign? <input type="checkbox"/> Yes <input type="checkbox"/> No May We Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Telephone Number (Area Code)		Pay Rate			
Immediate Supervisor		Starting	Ending		
Employer		Dates of Employment (State Month & Year)		Position Held (List Title/Major Responsibilities)	Reason for Leaving
Name/Address		From	To	Did you voluntarily resign? <input type="checkbox"/> Yes <input type="checkbox"/> No May We Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Telephone Number (Area Code)		Pay Rate			
Immediate Supervisor		Starting	Ending		
Employer		Dates of Employment (State Month & Year)		Position Held (List Title/Major Responsibilities)	Reason for Leaving
Name/Address		From	To	Did you voluntarily resign? <input type="checkbox"/> Yes <input type="checkbox"/> No May We Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Telephone Number (Area Code)		Pay Rate			
Immediate Supervisor		Starting	Ending		
Employer		Dates of Employment (State Month & Year)		Position Held (List Title/Major Responsibilities)	Reason for Leaving
Name/Address		From	To	Did you voluntarily resign? <input type="checkbox"/> Yes <input type="checkbox"/> No May We Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Telephone Number (Area Code)		Pay Rate			
Immediate Supervisor		Starting	Ending		
Employer		Dates of Employment (State Month & Year)		Position Held (List Title/Major Responsibilities)	Reason for Leaving
Name/Address		From	To	Did you voluntarily resign? <input type="checkbox"/> Yes <input type="checkbox"/> No May We Check Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Telephone Number (Area Code)		Pay Rate			
Immediate Supervisor		Starting	Ending		

Please explain any gaps in employment: _____

ACTIVITIES

List memberships, activities, and other positions which you participate in, or have participated in, or other skills which you possess, which may further qualify you for a position at Wedgwood Christian Services.

PHILOSOPHY

Please describe your personal philosophy as it relates to your interest in applying for a position at Wedgwood. What led you to apply for a position? What do you hope to accomplish in this work? How does this fit with your career goal and interest?
(Use back as needed)

REFERENCES

Give the names, addresses, and phone numbers of five persons who have known you for the past three years and can speak toward your personal character. **Do not list supervisors listed previously or relatives.**

Name	Relationship to You	Address	Phone – Daytime & Evening	

List Friends or Relatives Currently Working for Wedgwood: _____

APPLICANT CERTIFICATION AND AGREEMENT
Equal Opportunity Employer

I hereby certify that the statements made by me on this Application are true, complete, and correct to the best of my knowledge. I grant permission to verify such answers including a Criminal Record Check, Driving Record Check, Central Abuse Registry Check, Verification of Employment Eligibility, Health Status Verification, Education Verification, etc., and understand that any misstatement or omission of fact on this Application, or on related employment materials, may be considered as sufficient cause for rejection of this Application or for my dismissal if such information is discovered subsequent to my employment.

I authorize Wedgwood to make inquiry concerning my aptitude, skills, and character, including inquiry concerning my past employment records. I release Wedgwood, and all my previous employers and their respective agents and employees, from any and all claims arising in any way from their participation in such inquiry references check.

I understand that this Application will remain active for a period of six (6) months from the date of this Application and that I must notify Wedgwood in writing at the end of such period if I wish to reactivate or amend this Application, or if I wish to include any new/or changed information.

I further understand that if I am offered a position I will be asked to complete a Physical Examination and TB skin test, and may be required to complete a Pre-Employment Drug Screening Test. I also except that employment with Wedgwood shall be at wages, benefits, hours, conditions, and under other such employment policies as outlined in the Employee Manual of Policy and Procedures, which are subject to change at the agency's discretion. I understand that no one other, than the Executive Director of this agency, has the authority to enter into any agreement for a specified period of time or to make any agreement which is contrary to the foregoing, and that any such agreement must be in writing and signed by the Executive Director in order for it to be binding.

Signature of Applicant _____ Date _____

DISCLOSURE