**FAMILIES, INC.**

**APPLICATION FOR EMPLOYMENT**

**PERSONAL INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (Last, First, Middle Initial) | | | Social Security No. | | Date: |
| Address (Street, City, State, Zip) | Telephone (Work): | Telephone (Home): | | Email: | |

**DESIRED EMPLOYMENT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Position applied for: | Date available to start: | | | Salary desired: |
| Are you currently employed?  Yes  No | | | If so, may we inquire of your present employer?  Yes  No | |
| Name of current employer | | Address of current employer | | |
| Have you ever worked for Families, Inc. before?  Yes  No If yes, give dates and position(s) | | | | |

**EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **level** | **Name and location of school(s)** | **no. of years attended** | **Degree** | **major** |
| **high school** |  |  |  |  |
| **colleges** |  |  |  |  |
| **graduate schools** |  |  |  |  |
| **other** |  |  |  |  |

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**PREVIOUS EMPLOYERS**

|  |
| --- |
| Name of present or last employer: |

|  |  |  |
| --- | --- | --- |
| Street Address: | City, State, Zip: | Telephone: |

|  |  |  |
| --- | --- | --- |
| Job Title: | Start Date: | Leaving Date: |

|  |  |  |
| --- | --- | --- |
| Monthly Starting Salary: | Monthly Current or Ending Salary: | May we contact your supervisor?  Yes  No |

|  |  |  |
| --- | --- | --- |
| Name of Supervisor: | Title: | Telephone: |

|  |
| --- |
| Description of your duties: |
| Reason for leaving: |

|  |
| --- |
| Name of previous employer: |

|  |  |  |
| --- | --- | --- |
| Street Address: | City, State, Zip: | Telephone: |

|  |  |  |
| --- | --- | --- |
| Job Title: | Start Date: | Leaving Date: |

|  |  |  |
| --- | --- | --- |
| Monthly Starting Salary: | Monthly Current or Ending Salary: | May we contact your supervisor?  Yes  No |

|  |  |  |
| --- | --- | --- |
| Name of Supervisor: | Title: | Telephone: |

|  |
| --- |
| Description of your duties: |
| Reason for leaving: |

|  |
| --- |
| Name of previous employer: |

|  |  |  |
| --- | --- | --- |
| Street Address: | City, State, Zip: | Telephone: |

|  |  |  |
| --- | --- | --- |
| Job Title: | Start Date: | Leaving Date: |

|  |  |  |
| --- | --- | --- |
| Monthly Starting Salary: | Monthly Current or Ending Salary: | May we contact your supervisor?  Yes  No |

|  |  |  |
| --- | --- | --- |
| Name of Supervisor: | Title: | Telephone: |

|  |
| --- |
| Description of your duties: |
| Reason for leaving: |

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**REFERENCES**

*Please give the names of three professional references that are familiar with your work.*

|  |  |  |  |
| --- | --- | --- | --- |
| **name** | **address** | **business** | **years acquainted** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **Have you ever been convicted of a felony or misdemeanor?  Yes  No** |
| **Has there ever been a child abuse report made concerning you?  Yes  No** |
| **Is there any reason that you would not be able to perform the job description?  Yes  No** |
| If yes to any of the above, please explain (a yes answer will not necessarily exclude you from consideration). |

**AUTHORIZATION**

I affirm that my answers to the foregoing questions are complete, true, correct, and I understand that misrepresentation or omission of facts called for in this application or other Families, Inc. records will be cause for immediate dismissal. I understand this is an application for employment and not an offer for employment.

Applicant’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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