



For kids, family, community and you

APPLICATION FOR EMPLOYMENT

DATE: _____

PERSONAL INFORMATION

NAME PHONE (_____) _____ - _____

LAST FIRST MIDDLE

PRESENT ADDRESS

STREET CITY STATE ZIP

PERMANENT ADDRESS

EMAIL ADDRESS

OVER 18 YEARS OF AGE Yes _____ No _____

HOW OR FROM WHOM DID YOU HEAR ABOUT THE POSITION?

EMPLOYMENT DESIRED

POSITION: _____

PLEASE CIRCLE: FULL-TIME OR PART-TIME

GEOGRAPHICAL AREA: PLEASE CIRCLE ALL THAT APPLY

ALTOONA CEDAR RAPIDS DES MOINES DUBUQUE FT DODGE INDEPENDENCE
IOWA CITY MASON CITY MONTICELLO NEWTON WATERLOO

EDUCATION

	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED*	DATE GRADUATED*	SUBJECTS/ DEGREE
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL				

* THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO INDIVIDUALS WHO ARE AT LEAST 40 BUT LESS THAN 70 YEARS OF AGE.

FORMER EMPLOYERS

(LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH / DAY / YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM / /				
TO / /				
FROM / /				
TO / /				
FROM / /				
TO / /				
FROM / /				
TO / /				

GENERAL

ARE YOU CURRENTLY EMPLOYED? IF SO, MAY WE INQUIRE YOUR PRESENT EMPLOYER? YES OR NO

HAVE YOU EVER APPLIED WITH THIS AGENCY BEFORE?

WHERE?

WHEN:

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK OR ANY OTHER SKILLS (IE. LANGUAGES):

U.S. MILITARY OR NAVAL SERVICE PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES? YES OR NO**REFERENCES**

GIVE BELOW THE NAMES OF FOUR (4) PERSONS (NOT RELATED TO YOU) WHICH YOU HAVE KNOWN, FOR AT LEAST ONE YEAR, IN A WORK RELATED SETTING:

NAME	PHONE	EMAIL	BUSINESS	YEARS KNOWN
1.				
2.				
3.				
4.				

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL, FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

SIGNATURE:

DATE:

INTERVIEW BY:

DATE:

THIS FORM HAS BEEN DESIGNED TO COMPLY WITH STATE AND FEDERAL FAIR EMPLOYMENT PRACTICE LAWS PROHIBITING DISCRIMINATION ON THE BASIS OF AN APPLICANT'S SEX OR MINORITY STATUS. QUESTIONS DIRECTLY OR INDIRECTLY REFLECTING SUCH STATUS HAVE BEEN INCLUDED **ONLY** WHERE NEEDED TO DETERMINE A BONA FIDE OCCUPATIONAL QUALIFICATION OR FOR OTHER PERMISSIBLE PURPOSES, SUCH QUESTIONS ARE APPROPRIATELY NOTED ON THE APPLICATION.



INFORMATION DISCLOSURE

...protecting our clients...

Chapter 237.8 of the Code of Iowa requires that criminal and child abuse record checks be completed on anyone working in a child foster care agency as part of licensing standards. As a volunteer or staff person of Four Oaks, you may be subject to that same regulation depending upon the nature of your position.

In accordance with Chapter 692A.13(3) of the Code of Iowa, we will do a search on the Sex Offenders Registry.

In order to be considered for a position with this agency, you are required to disclose the following information:

Please Print:

Last Name	
Maiden Name	
First Name	
Middle Name	
Social Security Number (SSN)	
Date of Birth (DOB)	
Gender	

Please check the appropriate statement and add any additional information that is required:

	<p>I hereby state that I have never been convicted by law, in any State of commission, for the following: any criminal act, operating a motor vehicle under the influence (OMVI), child abuse (child neglect, child endangerment, or lascivious acts involving a child) or dependent adult abuse.</p>
	<p>I hereby state that I have been convicted by law of the following action:</p> <p>In the State of _____</p>

If I am offered a position with this agency and such act has occurred, I understand that I will need to request and be granted an authorization to participate from the Department of Human Services. I further understand that falsification of this information is grounds for dismissal and I must advise the agency of any convictions while affiliated with Four Oaks.

Signature: _____

Date: _____