



# Inland Respite, Inc.

Date: \_\_\_\_\_  
 Position: \_\_\_\_\_

## EMPLOYMENT APPLICATION

Referred By: \_\_\_\_\_  
 Client Name: \_\_\_\_\_

We are committed to a policy of Equal Employment Opportunity and will not discriminate on any legally recognized basis, including but not limited to race, age, color, religion, sex, sexual preference, marital status, national origin, genetic information citizenship, ancestry, handicap or disability or veteran status.

### Personal Background

Name \_\_\_\_\_  
 Last First Middle Name/Initial

Present Address: \_\_\_\_\_  
 Street Apt# City State Zip

Mailing Address \_\_\_\_\_  
 Street/P.O.Box City State Zip

Phone No: ( ) \_\_\_\_\_ Message Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

#### Circle YES or NO

If driving is a requirement of the job for which you are applying, do you have a current, valid driver's license? YES NO

If driving is a requirement of the job for which you are applying, continued employment is contingent on your maintaining a current driver's license and auto insurance.

If a minor, can you produce the age/work certificate necessary to obtain employment YES NO

Are you able, at the time of employment, to submit verification of your legal right to work in the United States? YES NO

If professional license or certification such as Cardio-Pulmonary Resuscitation (adult, infant and child) and First Aid is a requirement of the job you are applying for, continued employment is contingent on your maintaining certification.

### Educational Background

| Educational Background             | Name and Location of School | Circle Highest Grade Completed | Major Area of Study |
|------------------------------------|-----------------------------|--------------------------------|---------------------|
| High School                        |                             | 1 2 3 4 5 6 7 8                |                     |
|                                    |                             | 9 10 11 12 GED                 |                     |
| College                            |                             |                                |                     |
|                                    |                             |                                |                     |
| Trade, Business or Graduate School |                             |                                |                     |
|                                    |                             |                                |                     |
| US Military or Civil Service       |                             | RANK                           | Type of Discharge:  |
|                                    |                             |                                |                     |

Employment Application continued...

Specialized technical skills (example: computer, equipment operation, special tools or machines used, different computer programs used, special training or certificates. \_\_\_\_\_)

Can you with or without accommodation perform the essential functions of the job(s) for which you have applied? YES NO

If no, please identify those essential functions that you are not able to perform \_\_\_\_\_

Have you read the job description for which you are applying? YES NO

Are you related to anyone working for this company? YES NO  
 If yes, who? \_\_\_\_\_ Relationship \_\_\_\_\_

| LANGUAGES<br>Including American Sign | SPEAK AND UNDERSTAND |                 | READ     |                 | WRITE    |                 |
|--------------------------------------|----------------------|-----------------|----------|-----------------|----------|-----------------|
|                                      | Fluently             | With difficulty | Fluently | With Difficulty | Fluently | With Difficulty |
| 1)                                   |                      |                 |          |                 |          |                 |
| 2)                                   |                      |                 |          |                 |          |                 |
| 3)                                   |                      |                 |          |                 |          |                 |

| <b>WORK EXPERIENCE –List below the last four employers, starting with your present employer or the last place you worked. You may include in your work experience, any verified work performed on a volunteer basis.</b> |                                   |        |          |                    |                    |
|--|-----------------------------------|--------|----------|--------------------|--------------------|
| Date: Mo/Year  | Employer:                         | Salary | Position | Name of Supervisor | Reason for Leaving |
| From:<br>To:   | Name:<br>Address:<br>City: Phone  |        |          |                    |                    |
| From:<br>To:   | Name:<br>Address:<br>City: Phone: |        |          |                    |                    |
| From:<br>To:   | Name:<br>Address:<br>City: Phone: |        |          |                    |                    |
| From:<br>To:   | Name:<br>Address:<br>City: Phone: |        |          |                    |                    |
| From:<br>To:   | Name:<br>Address:<br>City: Phone: |        |          |                    |                    |

**REFERENCES:** Give the names of three persons (no relatives), that you have known at least three years, and the best time to call.

| Name & Occupation | Address | Telephone | Years Known | Best time to call |
|-------------------|---------|-----------|-------------|-------------------|
| 1.                |         |           |             |                   |
| 2.                |         |           |             |                   |
| 3.                |         |           |             |                   |
| 4.                |         |           |             |                   |

**APPLICANT'S STATEMENT**

In signing this application, I certify that all of the foregoing information is a complete and accurate statement of the facts and I understand that if any misrepresentation, omission or falsification were discovered, it will constitute grounds for dismissal. I, hereby, authorize you to check my references and conduct any investigation necessary concerning any part of my background related to the position I am seeking. I release all parties from any liability in connection with the provision and use of such information.

I am looking for employment and affirm that I have a genuine intent and no other purpose in applying for a job with this organization.

I understand and agree that, if employed by this organization, I will abide by its rules and regulations, which I understand, are subject to change. I further understand that, if hired, my employment is an **“at-will”** relationship and employment is for no definite period of time and may be terminated by either party at any time.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date