## **Bartholomew County Youth Services Center Application for Employment**

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant name:	Date:			
Applicant name: Position(s) applied for or type of work desired:				
Address:				
Telephone Number:	Social Security Num	ıber:		
Telephone Number:  Type of employment desired: Full-time	Part-time		Relief	
Date you will be available to start work:				
Do you have any commitments which might interfere	,			
your employment with our organization (I.E. se		Yes	No	
Do you have any objection to working overtime if nec	Yes	No		
Can you travel if required by this position?	Yes			
Have you ever been previously employed by our organ	Yes	No		
Can you submit proof of legal employment authorizati	Yes	No		
Are you at least 21 years of age?	Yes	No		
Have you ever been arrested on a felony or misdemean	nor charge?	Yes	No	
If yes, please explain (an arrest record will not	automatically bar employs	ment):		
Drivers license number:  How were you referred to us?  Education  List school name and location, years completely  High school:  College:  Technical Training:  Other:	onal History leted, course of study, and	any degrees ear		
Please provide all employment information for your Employer:  Address:				
Immediate supervisor and title:		0-1		
Dates employed: From To		Salary	<del></del> :	
Job summary:				

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## Employment History continued

Employer:	Position held:			
Address.	Tolophono Myssel ass			
Immediate supervisor	and title:			
Dates employed:	From	То	Salary	
Job summary:			Salary	
Reason for leaving:				
Employer:		Position held:		
Address:	V2	Telephone Number:		
Immediate supervisor	and title:	•	Salary	
Dates employed:	From	То	Salary	
Job summary:	21 <del></del>		Salary	
Reason for leaving:				
Employer:	Position held:			
minieurate supervisor a	and title:			
- mile chilpie jeu.	LIUIII	10	Salarar	
Jou summary.				
Reason for leaving:				
	my job-related tra		ions cates, and/or other qualifications:	
List 3 references	names, <u>day time</u>	References telephone numbers, and year	ars known (do not include relatives):	
Name:		Day Time Phone Number:	Years known:	
Name:		Day Time Phone Number: _	Years known:	
Name:		Day Time Phone Number: _	Years known:	

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Please explain in the following lines why you are interested in the type  Bartholomew County Youth Services Co	
	320
3	
Please read and initial the following statements (applications will n	ot be accepted if not completed):
I hereby authorize the potential employer to contact, obtain, and verify the accuracy of it all previous employers, educational institutions, and references. I also hereby release fr representatives for seeking, gathering, and using such information to make employment organizations for providing such information.	om liability the potential employer and its
I understand that any misrepresentation or material omission made by me on this application of this application or immediate termination of employment if I am employed, whenever	ation will be sufficient cause for cancellation it may be discovered.
If I am employed, I acknowledge that there is no specified length of employment and that agreement or contract for employment. Accordingly, either the employer or I can termin cause, at any time, so long as there is no violation of applicable federal or state law.	this application does not constitute an attempt at will, with or without
I understand it is the policy of this organization not to refuse to hire or otherwise discrim disability because of that persons' need for a reasonable accommodation as required by	
I also understand that if I am employed, I will be required to provide satisfactory proof within three days of being hired. Failure to submit such proof within the required time s employment.	
I understand and accept that if I am hired, I am hired conditionally upon passing any me the employer deems to be necessary to determine my ability to perform the essential function that this may include drug, alcohol or substance abuse testing.	
I understand that the employer provides service on a seven day per week and twenty-four by the Youth Services Center I may be required to work evening shifts or night shifts, inc that a Criminal History Check will be run as a prerequisite to my employment and that I check.	luding weekends. I also understand
I represent and warrant that I have read and fully understand	d the foregoing, and that I seek
employment under these conditions:	Date: