

## APPLICATION FOR EMPLOYMENT

- Do not leave any unanswered questions.
- Incomplete applications may affect your prospects of employment.
- Attach your resume and complete the requested Employment History information.
- NLRM-NLRHH is an equal opportunity employer.
- All information from your application and resume will be treated confidentially.

Applicant Name  Street  City	Date of Application				
State Zip Code					
State Zip Code					
State					
State Zip Code					
Home Telephone () When is best time to call? □AM □PM Cellular Telephone () When is best time to call? □AM □PM Business Telephone () When is best time to call? □AM □PM May we contact you at work? □ YES □ NO Cemail Address How were you referred to New Life Refuge Ministries / NLRM / NLRHH: □ Employee □ Relative □ School Advertisement □ Private Employment Agency □ Indeed □ Facebook □ Linked-In □ Other  Type of employment: □ Full time □ Part time □ Temporary Date available to begin work: □ Immediately □ Other Days/Hours available: □ Do you have any commitments to another employer that might affect your employment with					
Business Telephone ()					
Business Telephone ()	Cellular Telephone ()				
May we contact you at work? □ YES □ NO  Email Address  How were you referred to New Life Refuge Ministries / NLRM / NLRHH:  □ Employee □ Relative □ School Advertisement □ Private Employment Agency □ Indeed □ Facebook □ Linked-In □ Other  Type of employment: □ Full time □ Part time □ Temporary  Date available to begin work: □ Immediately □ Other  Days/Hours available: □ Days unavailable: □ Do you have any commitments to another employer that might affect your employment with					
How were you referred to New Life Refuge Ministries / NLRM / NLRHH:    Employee	May we contact you at work? □ YES □ NO				
How were you referred to New Life Refuge Ministries / NLRM / NLRHH:    Employee	Email Address				
Relative School Advertisement					
Relative School Advertisement	□ Employee				
□ School Advertisement □ Private Employment Agency □ Indeed □ Facebook □ Linked-In □ Other □ Type of employment: □ Full time □ Part time □ Temporary □ Date available to begin work: □ Immediately □ Other □ Days/Hours available to work: □ AM □PM □Weekday □Weekend □Any □ List any days unavailable: □ Do you have any commitments to another employer that might affect your employment with					
Indeed   Facebook   Linked-In  Other	□ School Advertisement				
Other	□ Private Employment Agency				
Type of employment:   Full time  Part time  Temporary  Date available to begin work:  Immediately  Other  Days/Hours available to work:  AM  PM  Weekday  Weekend  Any  List any days unavailable:   Do you have any commitments to another employer that might affect your employment with	□ Indeed □ Facebook □ Linked-In				
Date available to begin work:   Immediately  Other  Days/Hours available to work:   AM  PM  Weekday  Weekend  Any  List any days unavailable:  Do you have any commitments to another employer that might affect your employment with	□ Other				
Date available to begin work:   Days/Hours available to work:   AM   PM   Weekday   Weekend   Any  List any days unavailable:   Do you have any commitments to another employer that might affect your employment with					
Days/Hours available to work:   AM   PM   Weekday   Weekend   Any  List any days unavailable:   Do you have any commitments to another employer that might affect your employment with	Type of employment: □ Full time □ Part time	ne   □ Temporary			
List any days unavailable:  Do you have any commitments to another employer that might affect your employment with	Date available to begin work: □ Immediatel	y 🗆 Other			
Do you have any commitments to another employer that might affect your employment with	Days/Hours available to work: $\square$ AM $\square$ PM	□Weekday □Weeken	d □Any		
JI DM NI DUU including confidentiality non disclosure or non compatition agreements?					
			-		
□Yes □No If yes, please describe:					
Do you have any physical limitations that would prevent you from performing the job you are applying	Do you have any physical limitations that w for? □Yes □ No If yes, please describe:	ould prevent you from	n performing the job you are applying		

## TYPE OF WORK DESIRED

Indicate the position/s for which you are applying from the list below.

Child Care Administrator (CCA licensure required) Treatment Director Facilities Manager Professional Level Service Provider Educational Services Director House Parent Teacher Carediver (Daytime) Caregiver (Daytime) Caregiver (Awake/ Overnight) Property Maintenance Music Therapy Pet Therapy Equine Therapy Volunteer					
SKILLS AND QUALIFICATIONS					
Summarize any licenses, certificates, training or skills that might qualify you to perform job-related					
functions for the position for which you are applying. Include Expiration and/or Renewal dates.					
Licenses					
Certificates					
Specialized Training					
Skills					
GENERAL INFORMATION  Are you legally eligible for employment in the United States? □Yes □No  If no, provide status, if applicable:					
Please indicate what size vehicles you are licensed to drive:					
☐ Standard Vehicle ☐ 12-15 Passenger Van					
Classification: □ Operator □ Chauffeur □ Commercial (COL) □ Other:					
□ Other: Drivers License - ·State issued: #: Exp:					
Jivers Electise State Issued					
Have you <b>ever</b> been convicted of a felony? □ Yes □ No Within the last two years, have you been convicted of a misdemeanor which resulted in imprisonment? □Yes □ No If yes to either, please explain:					
Have you ever been involuntarily terminated from a job? ☐ Yes ☐ No					
If so, please explain circumstance:					
Have you previously applied for employment here? □ Yes □ No  If yes, give details:					
Do you have any relatives employed by New Life Refuge, NLRM or NLRHH?   Relationship to you:					

## **EMPLOYMENT HISTORY**

List all employment, assignments, volunteer or military activities for the last ten (10) years, starting with your most recent. (Attach additional sheets as necessary.) Please explain any gaps in employment.

Dates Employed: from	to		
Employer:			
Address:			
Telephone Number:			
Your Job Title:			
Hourly Rate/Salary: Starting:		Final:	
Job Responsibilities:			
Reason for Leaving:			
May we contact for reference: □Y€	es □No		
If no, please explain:			
Dates Employed: from	to		
Employer:			
Address:			
Telephone Number:			
Your Job Title:			
Hourly Rate/Salary: Starting:		Final:	
Job Responsibilities:			
Reason for Leaving:			
May we contact for reference: $\Box$ Ye	es □No		
If no, please explain:			
Datas Employadi from	to		
Dates Employed: from			
Employer:Address:			
Telephone Number:Your Job Title:			
Hourly Rate/Salary: Starting:		Final:	
Job Responsibilities:			
Reason for Leaving:			
May we contact for reference: □Ye	es ¬No		· · · · · · · · · · · · · · · · · · ·
If no, please explain:			
ii no, piease explain.			
Dates Employed: from	to		
Employer:			
Address:			
Telephone Number:			<del> </del>
Hourly Rate/Salary: Starting:		Final:	
Job Responsibilities:		<del></del>	
Reason for Leaving:			
May we contact for reference: □Ye	es □No		
If no, please explain:			

## **REFERENCES**

List names and telephone numbers of three (3) business/work and one (1) pastoral/spiritual reference who are NOT related to you. If you do not have work experience, please list three (3) school or personal references who are NOT related to you. Please ensure that you provide working telephone numbers with area codes, as the inability to contact a reference may delay the hiring process.

Name	Phone	Email	Relationship
•		you think would be helpful ferience, articles/books published	~ ·
"I,		agutifu	that the information contained in this
any false or mislea I hereby authorize references and oth employment with	iding statements or mate former and present emp er sources to provide or	re investigation of all statemerial omissions are cause for a bloyers except as I have other verify any information that the Ministries, NLRM, NLRH	ents contained in this application and that termination of employment, if employed. Twise indicated on this application, whey may have regarding me or my IH, and release them from any liability
my employment or obligation beyond	r an offer of employmen pay for actual work per	at establishes no guarantee of formed at the agreed upon ra	te or local law, where applicable, continued employment or te of pay and that my employment may LRM, NLRHH, at either party's opinion
hospital administer check, fingerprint-	red Tuberculosis test, in based criminal history c	itial hiring drug test and com	complete and clear a medical facility or aplete a name based criminal history check and an out-of-state central ies, NLRM, NLRHH."
Applicant Signatur	re		Date
	es, NLRM / NLRHH is an equal c		will not be used for limiting or excluding any

applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Note:

- No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.
- NLRM-NLRHH complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.