



2420 East 10th Street
 Jeffersonville, Indiana 47130
 812.282.8248 - 812.282.3291 (fax)
 www.childplace.org - email: info@childplace.org

Office Use Only:
Date of Interview: _____
Date of Hire: _____
Rate of Pay: _____

APPLICATION FOR EMPLOYMENT

Form Revision: May 2013

NAME:		SS#:		DATE:	
ARE YOU AT LEAST 21 YEARS OLD OR OLDER (YOU MUST BE AT LEAST 21 TO WORK HERE):					YES / NO
ADDRESS:		CITY:		STATE:	ZIP:
TELEPHONE:		EMAIL:			

EDUCATION					
HIGH SCHOOL GRADUATE:		GED:			
HIGH SCHOOL:		DEGREE/MAJOR:		DATE COMPLETED:	
COLLEGE/TECH:		DEGREE/MAJOR:		DATE COMPLETED:	
GRADUATE SCHOOL:		DEGREE/MAJOR:		DATE COMPLETED:	

EMPLOYMENT HISTORY (PLEASE LIST CURRENT OR MOST RECENT FIRST)

COMPANY:		POSITION:	
ADDRESS:		SALARY:	
DATES OF EMPLOYMENT:		REASON FOR LEAVING	
PRIMARY SUPERVISOR:		MAY WE CONTACT THIS EMPLOYER:	YES / NO
TELEPHONE:		EMAIL:	

COMPANY:		POSITION:	
ADDRESS:		SALARY:	
DATES OF EMPLOYMENT:		REASON FOR LEAVING	
PRIMARY SUPERVISOR:		MAY WE CONTACT THIS EMPLOYER:	YES / NO
TELEPHONE:		EMAIL:	

COMPANY:		POSITION:	
ADDRESS:		SALARY:	
DATES OF EMPLOYMENT:		REASON FOR LEAVING	
PRIMARY SUPERVISOR:		MAY WE CONTACT THIS EMPLOYER:	YES / NO
TELEPHONE:		EMAIL:	

COMPANY:		POSITION:	
ADDRESS:		SALARY:	
DATES OF EMPLOYMENT:		REASON FOR LEAVING	
PRIMARY SUPERVISOR:		MAY WE CONTACT THIS EMPLOYER:	YES / NO
TELEPHONE:		EMAIL:	

PLEASE LIST THE SKILLS WHICH YOU BELIEVE WILL BE HELPFUL TO YOU IN THE POSITION YOU SEEK:

GENERAL INFORMATION:			
HAVE YOU EVER BEEN CONVICTED OF "ANY" FEDERAL OFFENSE OR A MISDEMEANOR RELATED TO CHILDREN?			YES / NO
IF "YES" PLEASE LIST:			
ARE YOU CERTIFIED IN FIRST AID?	YES / NO	ARE YOU CERTIFIED IN CPR?	YES / NO
IF APPLYING FOR A RESIDENTIAL POSITION, ARE YOU ABLE TO SUSTAIN SIGNIFICANT PHYSICAL ACTIVITY?			YES / NO
DO YOU HAVE ANY PHYSICAL CONDITION THAT WOULD PLACE YOU OR THE CHILDREN WITH WHOM YOU WOULD BE WORKING AT RISK?			YES / NO

PERSONAL REFERENCES -PLEASE DO NOT LIST FAMILY MEMBERS (CHILDPLACE MUST MAKE CONTACT WITH THREE):

I AUTHORIZE CHILDPLACE STAFF TO CONTACT THE FOLLOWING REFERENCES: YES / NO

NAME:		RELATIONSHIP:	
ADDRESS:		LENGTH OF TIME KNOWN:	
PHONE:		EMAIL:	
NAME:		RELATIONSHIP:	
ADDRESS:		LENGTH OF TIME KNOWN:	
PHONE:		EMAIL:	
NAME:		RELATIONSHIP:	
ADDRESS:		LENGTH OF TIME KNOWN:	
PHONE:		EMAIL:	
NAME:		RELATIONSHIP:	
ADDRESS:		LENGTH OF TIME KNOWN:	
PHONE:		EMAIL:	

MOST POSITIONS AT CHILDPLACE, INC. REQUIRE TRANSPORTING CLIENTS; THEREFORE, THE FOLLOWING INFORMATION IS INVESTIGATED TO DETERMINE COMPANY VEHICLE USAGE:

DO YOU CURRENTLY HOLD A VALID DRIVERS LICENSE?	YES / NO	STATE THAT ISSUED LICENSE?	
FULL NAME AS IT APPEARS ON LICENSE:			
DRIVERS'S LICENSE NUMBER:		DATE OF BIRTH:	
HOW MANY MOVING TRAFFIC VIOLATIONS HAVE YOU HAD IN THE LAST FIVE YEARS?			
DATES AND TYPES OF VIOLATIONS:			
ANY TICKETS FOR CARELESS OR RECKLESS DRIVING?	YES / NO	DATE(S):	
HOW MANY ACCIDENTS HAVE YOU HAD IN THE LAST FIVE YEARS?			
DATES AND PERSON AT FAULT:			
HAS ANY COMPANY CANCELED OR REFUSED TO ISSUE OR RENEW AUTO INSURANCE TO YOU?			YES / NO
IF "YES", BRIEFLY EXPLAIN:			
HAVE YOU EVER HAD A SUSPENDED OR REVOKED DRIVERS LICENSE?			YES / NO
IF "YES", BRIEFLY EXPLAIN:			

AVAILABILTY (PLEASE CHECK SHIFTS AVAILABLE)

MON	1 st	TUES	1 st	WED	1 st	THURS	1 st	FRI	1 st	SAT	1 st	SUN	1 st
	2 nd		2 nd		2 nd		2 nd		2 nd		2 nd		2 nd
	3 rd		3 rd		3 rd		3 rd		3 rd		3 rd		3 rd

SPECIAL REQUESTS/DATES NEEDED OFF: _____

- MISSION STATEMENT: CHILDPLACE EXISTS TO SERVE CHILDREN AT RISK BY MEETING THEIR NEEDS AND EQUIPPING THEM FOR LIFE IN A SPIRIT OF CHRISTIAN LOVE.
- BY ACCEPTING THIS APPLICATION, CHILDPLACE, INC. DOES NOT INDICATE THE INTENT TO INTERVIEW OR HIRE.
- APPLICATIONS ARE RETAINED FOR ONE YEAR.
- A RESUME' MAY BE ATTACHED TO PROVIDE ADDITIONAL INFORMATION.
- ALL INDIVIDUALS WHO ARE OFFERED EMPLOYMENT ARE REQUIRED TO SUBMIT TO MULTIPLE BACKGROUND CHECKS AND COMPLETE A PRE-EMPLOYMENT PHYSICAL AND TB SCREEN.
- BY SIGNING BELOW I ATTEST THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE, AND I UNDERSTAND THAT FALSIFICATION OF ANY INFORMATION PROVIDED ON THIS APPLICATION IS GROUNDS FOR TERMINATION OF EMPLOYEMENT.

APPLICANT'S SIGNATURE

DATE