# EMPLOYMENT APPLICATION

***Bending Birch Behavioral Services, LLC, is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.***

*(The application must be completed in full even if a resume is attached.* ***THIS APPLICATION IS CURRENT FOR 90 DAYS ONLY****. At the end of this period, if you are still interested in employment, it will be necessary for you to reapply.)*

**DATE OF APPLICATION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **PERSONAL INFORMATION**

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Last First Middle*

FORMER/MAIDEN NAME (If applicable, for the purpose of Background and Licensure searches):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAILING ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Street City State Zip

PHONE NUMBERS: HOME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WORK\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
May we contact you at work?  Yes  No

Are you 18 years of age or older?  Yes  No (If no and offered employment, you may be required to provide authorization to work.)

Are you legally eligible for employment in the United States?  Yes  No (If offered employment, you will be required to provide documentation to verify eligibility.)

Have you ever applied for employment with Bending Birch before? If yes, give approximate date. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
Have you ever worked for Bending Birch before? If yes, give approximate dates. From\_\_\_\_\_\_\_\_\_\_\_\_ To\_\_\_\_\_\_\_\_\_\_\_

Are any of your relatives currently employed by Bending Birch? If yes, provide name and relationship. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of a crime other than a minor traffic offense? If yes, please explain. (A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**POSITION INFORMATION**

WHAT POSITION ARE YOU APPLYING FOR?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE AVAILABLE:\_\_\_\_\_\_\_\_\_\_ DESIRED PAYRATE:\_\_\_\_\_\_\_\_\_  FULL TIME  PART TIME DESIRED HOURS/WEEK:\_\_

**SCHEDULE AVAILABILITY** *(Required* *if applying for part-time employment or a position that delivers direct services to the client.)*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **HOURS AVAILABLE** | **MONDAY** | **TUESDAY** | **WEDNESDAY** | **THURSDAY** | **FRIDAY** | **SATURDAY** | **SUNDAY** |
| **FROM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** |
| **TO** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** |
| **FROM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** |
| **TO** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** | **AM**  **PM** |
| Do you expect your availability to change in the near future? If yes, please explain.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_\_\_\_  ***WORK SCHEDULES MAY BE SUBJECT TO CHANGE BASED UPON THE NEEDS OF THE BUSINESS.*** | | | | | | | |

**EDUCATIONAL INFOMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **EDUCATION LEVEL** | **NAME OF INSTITUTION CITY, STATE** | **MAJOR/SUBJECT (If Applicable)** | **YEARS COMPLETED** | **GRADUATED** | **LEVEL** |
| **High School/GED** |  |  | **1  2   3  4** | **Yes  No** | **Ex. Bach, Mast** |
| **College** |  |  | **1  2   3  4** | **Yes  No** |  |
| **College** |  |  | **1  2   3  4** | **Yes  No** |  |
| **Graduate School** |  |  | **1  2   3  4** | **Yes  No** |  |
| **Vocational School/Other** |  |  | **1  2   3  4** |  |  |

**CERTIFICATION/LICENSURE** *(List all valid* certifications*/licenses. If offered employment, you will be required to provide documentation.)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TYPE OF CERTIFICATE/LICENSE** | **ENDORSEMENTS** | **ISSUE DATE** | **EXPIRATION DATE** | **STATE** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**EMPLOYMENT HISTORY: (Begin with most recent employment and continue with all past positions, add additional documents as needed)**

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| --- | --- | --- | --- | --- | --- | --- |
| **1** | **NAME OF EMPLOYER** | **FROM** | | **STARTING PAYRATE** | **JOB TITLE** | **NAME & TITLE OF IMMEDIATE SUPERVISOR** |
| **ADDRESS** | | **MO.** | **YR.** | **$** | **TYPE OF BUSINESS** |
| **CITY, STATE, ZIP** | | **TO** | | **ENDING  PAYRATE** | **MAY WE CONTACT EMPLOYER?** |
| **PHONE NO.** | | **MO.** | **YR.** | **$** | **REASON FOR LEAVING (Please explain)** | |
| **DESCRIBE YOUR JOB DUTIES** | | | | | | |
|  | | | | | | |
| **2** | **NAME OF EMPLOYER** | **FROM** | | **STARTING PAYRATE** | **JOB TITLE** | **NAME & TITLE OF IMMEDIATE SUPERVISOR** |
| **ADDRESS** | | **MO.** | **YR.** | **$** | **TYPE OF BUSINESS** |
| **CITY, STATE, ZIP** | | **TO** | | **ENDING  PAYRATE** | **MAY WE CONTACT EMPLOYER?** |
| **PHONE NO.** | | **MO.** | **YR.** | **$** | **REASON FOR LEAVING (Please explain)** | |
| **DESCRIBE YOUR JOB DUTIES** | | | | | | |
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| **3** | **NAME OF EMPLOYER** | **FROM** | | | | **STARTING PAYRATE** | | **JOB TITLE** | | **NAME & TITLE OF IMMEDIATE SUPERVISOR** | |
| **ADDRESS** | | **MO.** | | **YR.** | | **$** | | **TYPE OF BUSINESS** | |
| **CITY, STATE, ZIP** | | **TO** | | | | **ENDING  PAYRATE** | | **MAY WE CONTACT EMPLOYER?** | |
| **PHONE NO.** | | **MO.** | | **YR.** | | **$** | | **REASON FOR LEAVING (Please explain)** | | | |
| **DESCRIBE YOUR JOB DUTIES** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **4** | **NAME OF EMPLOYER** | | **FROM** | | | | **STARTING PAYRATE** | | **JOB TITLE** | | **NAME & TITLE OF IMMEDIATE SUPERVISOR** |
| **ADDRESS** | | | **MO.** | | **YR.** | | **$** | | **TYPE OF BUSINESS** | |
| **CITY, STATE, ZIP** | | | **TO** | | | | **ENDING  PAYRATE** | | **MAY WE CONTACT EMPLOYER?** | |
| **PHONE NO.** | | | **MO.** | | **YR.** | | **$** | | **REASON FOR LEAVING (Please explain)** | | |
| **DESCRIBE YOUR JOB DUTIES** | | | | | | | | | | | |
|  | | | | | | | | | | | |

**REFERENCE LIST:**

|  |  |
| --- | --- |
| **PROFESSIONAL** | **PERSONAL** |
| **NAME** | **NAME** |
| **TITLE/RELATIONSHIP** | **TITLE, If Applicable** |
| **ADDRESS** | **ADDRESS** |
| **PHONE NO.** | **PHONE NO.** |
| **NAME** | **NAME** |
| **TITLE/RELATIONSHIP** | **TITLE, If Applicable** |
| **ADDRESS** | **ADDRESS** |
| **PHONE NO.** | **PHONE NO.** |

**APPLICANT’S CERTIFICATION AND AGREEMENT** *(Please read before signing.)*

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| --- |
| I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Bending Birch Behavioral Services, LLC., to verify their accuracy and to obtain reference information on my work performance. I hereby release Bending Birch Behavioral Services, LLC., from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.  I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for termination of employment.  I understand and agree that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of Bending Birch Behavioral Services, LLC. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or Bending Birch Behavioral Services, LLC. may terminate my employment at any time with or without notice or cause.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Legal Signature of Applicant (Written Signature Required) Date |