THE ARC OF HAYWOOD COUNTY, INC., RESIDENTIAL SERVICES APPLICATION FOR EMPLOYMENT INSTRUCTION SHEET

Please take the time to fill out your application for employment in its <u>entirety</u>, legibly and in black ink or if emailed please use black ink and use word or pdf document. These instructions are to assist you in the completion of this application.

PERSONAL	Furnish your mailing address and physical address as well as your home phone number, cell phone number or your business phone number where you can be reached also, please add your email address. Furnish your previous address if you have lived at your current address for less than five (5) years.
EDUCATION	Fill in the information as requested. A copy of your high school diploma or GED certificate is required.
WORK EXPERIENCE	List your current/most recent employer in the first box and proceed with listing the employers you have had prior to that in chronological order in the remaining boxes.
PROFESSIONAL	List <u>five</u> (5) professional references (not personal/relatives) in this section. It
REFERENCES	is imperative to furnish the names, titles and complete mailing addresses/email address
	and phone numbers.
AUTHORIZATION	Please be advised that a criminal background screening will be processed for all
	prospective applicants. If you have had any convictions or violations, please list them
	on the reverse side of the Motor Vehicle Questionnaire. Be aware that a
	conviction/violation does not necessarily mean that you will not be hired for the position
	for which you are applying.

In order for your application to be processed, your signature is required. Unsigned applications will not be processed. Motor Vehicle History Form and Pre-Employment Authorization Release forms are separate from the application but must be turned in as required by the State of North Carolina.

We thank you for taking the time to complete your application fully to avoid any delay that may arise from an incomplete application.

The Arc of Haywood County Residential Services APPLICATION FOR EMPLOYMENT

Prospective employe	ees will re	ceive consideration without discri	minati	on because of rac status.	ce, religion, co	olor, sex, age	e, national origin, d	lisability or veteran
						Date of A	pplication	
PERSONAL								
Last Name		First Name		Mid	ldle Name	Home Pho	ne Including Area Co	de
Street Address						Cell Phone	Including Area Code	
						Business P	hone Including Area	Code
City, State, Zip				County		Email addı	ress	
IF YOU HAV	VE LIVE	D AT CURRENT ADDRESS I	LESS	 THAN 5 YEA]	RS. PLEASI	 E GIVE PR	REVIOUS ADDR	RESS BELOW
Street Address	· — — - · · —						e Including Area Cod	
City, State, Zip						Business Ph	none Including Area C	Code
Have you ever applied Have you ever been em Position Desired			-	es, month/year?	xpected	essential fur accommoda	nctions of the job with	unable to perform the or without reasonable require?
Are you legally eligible	e for employ			en a permanent resi	dent of the	When will y	you be available to be	gin work?
States?	:1 - £ -	State of North C FELONY, plead no contest or plead gui			Yes N			
		on does not necessarily mean that you wil						
Are you a relative of an	n Arc Client	? YES NO	If yes,	please indicate				
Are you the legal guard	lian of an A	rc Client? YES NO I	f yes, p	olease indicate				
EDUCATION	1							
SCHOOL		NAME AND LOCATION	CO	URSE OF STUDY	NO OF COMPI		DATE OF GRADUATION	COPY OF DEGREE OR DIPLOMA ATTACHED
COLLEGE								
HIGH SCHOOL								
OTHER								
		MEMDEDGHID IV	T OFFICE	CCIONAL OD CIVI	CODCANIZAT	TONG		
		MEMBERSHIP IN P (Exclude those which ma						
	SPECIAL	TRAINING PROGRAMS AND SEMIN	NARS Y	YOU HAVE COMP	LETED IN THE	LAST FIVE	YEARS (Please List)	

WORK	K EXPER	RIENCE							
EMPLOYE	R:				ADDRESS:				
JOB TITLE	:			SUP	ERVISOR'S NAM	ME:	TELEPHONE NUME	ER	NO. SUPERVISED BY YOU?
Date Emplo	yed (Month/Y	ear)	Starting Salary \$	Per		Ending Salary \$	Per	Reason	for Leaving?
Date Separa	ated (Month/Ye	ear)	LIST MAJOR I	OUTIES	IN ORDER OF T	HEIR IMPORTAI	NCE IN THE JOB:		
Full Time	Years	Months							
Part Time	Years	Months							
If part time,	please list hou	ırs per week							
EMPLOYER	<u> </u>				ADDRESS:				
JOB TITLE:				SUPER	RVISOR'S NAME	Ξ:	TELEPHONE NUMBE	R	NO. SUPERVISED BY YOU?
Date Employ	yed (Month/Ye	ear)	Starting Salary \$	Per		Ending Salary \$	Per	Reason fo	or Leaving?
Date Separat	ted (Month/Ye	ar)	LIST MAJOR DU	TIES IN	ORDER OF THI	EIR IMPORTANC	E IN THE JOB:		
Full Time	Years	Months							
Part Time	Years	Months							
If part time,	please list hou	rs per week							
EMPLOYE	R:				ADDRESS:				
JOB TITLE				SUPE	RVISOR'S NAM	Е:	TELEPHONE NUMBE		NO. SUPERVISED BY YOU?
Date Employed (Month/Year) Starting Salary F			Per		Ending Salary \$	Per	Reason f	or Leaving?	
Date Separa	ited (Month/Ye	ear)	LIST MAJOR DU	JTIES IN	N ORDER OF TH	EIR IMPORTANG	CE IN THE JOB:		
Full Time	Years	Months	-						
Part Time	Years	Months							
If part time,	please list hou	rs per week	1						

I	LAST NAME	

		LAST NAM	IE .
PROFESSIONAL REFERENCES numbers)	(*Note: All references <u>must</u> include comple	ete mailing addresses/email addre	ess and telephone
CONTACT PERSON & TITLE	MAILING ADDRESS, CITY, STATE, ZIP	EMAIL ADDRESS	TELEPHONE NUMBER
	,		
THE ARC OF HAMMOOD COIN	Please Read Carefully Before Sig		THE ADO OF
THE ARC OF HAYWOOD COUN HAYWOOD COUNTY, INC. DOE	,		
COLOR, RELIGION, NATIONAL			· · · · · · · · · · · · · · · · · · ·
DISABILITY OR MILITARY STAT		L STATUS, FITTSICAL	L OK WIENTAL
I UNDERSTAND THAT NEITHER	THE COMDITETION OF THIS ADD		THED DADT OF
MY CONSIDERATION FOR EMI			

HAYWOOD COUNTY, INC. TO HIRE ME. IF I AM HIRED, I UNDERSTAND THAT EITHER THE ARC OF HAYWOOD COUNTY, INC. OR I CAN TERMINATE MY EMPLOYMENT AT ANY TIME AND FOR ANY REASON, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE. I UNDERSTAND THAT NO REPRESENTATIVE OF THE ARC OF HAYWOOD COUNTY, INC. HAS THE AUTHORITY TO MAKE ANY

I CERTIFY THAT I HAVE GIVEN TRUE, ACCURATE AND COMPLETE INFORMATION ON THIS FORM TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT FALSE INFORMATION OR DOCUMENTATION OR A FAILURE TO DISCLOSE RELEVANT INFORMATION MAY BE GROUNDS FOR REJECTION OF MY APPLICATION, DISCIPLINARY ACTION OR DISMISSAL IF I AM EMPLOYED AND/OR CRIMINAL ACTION. I FURTHER UNDERSTAND THAT DISMISSAL UPON EMPLOYMENT SHALL BE MANDATORY IF FRAUDULENT DISCLOSURES ARE GIVEN TO MEET POSITION QUALIFICATIONS. (Authority G.S. 126-30, G.S. 14-122.1).

SIGNATURE OF APPLICANT

ASSURANCE TO THE CONTRARY.

DATE

(UNSIGNED APPLICATIONS WILL NOT BE PROCESSED)

Applications will be kept on file for 90 days. If you wish to apply for a different position within that time, you must fill out another application.

OFFICE USE ONLY

DATE REFERENCES MAILED:_____

COMMENTS:

	REQUESTED DA	ATE OF RETU	RN:	
INTERVIEW YI		DATE	Н	OUR
RESULT OF INTERV	IEW			
ACCEPTABLE FOR I	EMPLOYMENT?	YES	NO	
IF NO, DATE LETTE	R SENT?		IF YES, START DATE	?
POSITION:			GROUP HOME	
SALARY				
INTERVIEWED BY:				
RECOMMENDED BY	<i>/</i> :			
APPROVED BY:				
(Adı	ministrator)			

5

The Arc of Haywood County

EMPLOYMENT APPLICATION ATTACHMENT

APPLICANT MOTOR VEHICLE VIOLATION HISTORY

(To be attached to all applications for positions requiring agency vehicle operation)

The position for which you have applied requires the operation of agency vehicles. Additional information is necessary to determine if you are qualified to perform driving duties. Please answer all questions below and sign in the space provided. You may use the back for additional details if necessary.

1. Have you been convicted or pled guilty to a lesser charge in the past 3 years of driving under the influence or while

	intoxicated (DUI, D	WI)?		
	Yes	NO	If yes, give days, loo	eation, details
2.	Have you ever been	convicted in	n the past 3 years of re	ckless driving?
	Yes	NO	If yes, give days, loo	eation, details
3.	Have you ever been	convicted or	f driving with a revok	ed or suspended license or permit?
	Yes	NO	If yes, give days, loo	eation, details
١.	Have you ever been	convicted or	f leaving the scene of	an accident?
	Yes	NO	If yes, give days, loo	eation, details
5.	List speeding tickets charges, details, and		_	ns received in the last 3 years. Give dates, location, specific
ó.	Do you have a moto	or vehicle ope	erator's permit (expire	ed or unexpired) from another state?
	Yes	NO	If yes, give state and	number.
7.		-	•	uspended from driving, or discharged because of a motor f operator's permit, or due to the results of a drug or
	Yes	NO	If yes, give full deta	ils
			e account of my driving hi authorize a motor vehicle	story. I understand incorrect or false answers will result in denial of records check.
λp	plicant's Signature		Date	Operator's Permit Number

The Arc of Haywood County PRE-EMPLOYMENT INQUIRY AUTHORIZATION RELEASE

I understand that in connection with my application for employment, a background screening will be conducted which may include requests for information relating to my driving record, credit history, criminal record, civil matters, previous employment, education background, and other past experiences.

I hereby authorize the Arc of Haywood County, Inc. to investigate all information furnished by me on my employment application. I authorize any and all police and law enforcement agencies, courts or other agencies as may be contacted to release any records or information which may have a bearing upon convictions relative to me. I hereby release above agencies from any and all liability in conjunction with the release of said records of information.

Last Name	First Name	Middle
Social Security Number	Driver's License Number & State	Date of Birth
Former Names		
Signature		Date