

APPLICATION FOR EMPLOYMENT

Position(s) applying for: _____ Date of application: _____

Salary range requested: _____ Date available to work: _____

Type(s) of employment desired: Full-Time Part-Time

Type(s) of SHIFT desired: Days Evenings Weekends Nights

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone Number: _____ Best Time To Call: _____

Message Phone: _____ E-Mail address: _____
Name and Telephone Number

May we contact you at work? Yes No If yes, work number and best time to call: _____

Are you 18 or older? Yes No Are you legally eligible for employment in the U.S.A.? Yes No

Have you filed an application here before? Yes No If yes, give date: _____

Have you ever been employed here before? Yes No If yes, give date: _____

Do you have friends or family working or applying for us? Yes No If yes, whom: _____

Referral Source Advertisement Employee Relative Government Employment Agency
 Walk-in Private Employment Agency Other _____

Name of Source (if applicable) _____

Additional/Background Information

'Providers of community services':(1) are required to conduct a search of criminal history records and OKDHS Community Services Worker Registry (Department of Human Services registry review) prior to permanent employment of any community services worker; and (2) must not hire, contract with, or use as a volunteer, a person whose name is listed in the Registry or who has a criminal background described in OAC 340:100 3 39(d)(1)(G). Motor Vehicle Report (MVR).

Have you ever been convicted of, received probation, pleaded guilty (or no contest) to any felonies or misdemeanors?
 Yes No If yes, state when, where and the disposition of the case (attach additional sheet if needed.)

Have you ever had a confirmation of abuse, neglect, or exploitation made against you?
 Yes No If yes, state when, where and explain. (attach additional sheet if needed.)

Do you have a current valid driver license Yes No Issuing state _____ **NOTE:**
The existence of a criminal record will not necessarily be an automatic bar to employment. Factors such as date of offense, age at time of offense, seriousness and nature of the offense will be taken into consideration.

Application for Employment

Educational Information

Circle the last grade completed in high school and provide name of school: 8 or less 9 10 11 12 GED
 Name of school: _____
 Circle last year of school attended below, if graduated, and provide name of school:
 College 1 2 3 4 Graduated Name: _____
 Tech School 1 2 3 4 Graduated Name: _____
 Business School 1 2 3 4 Graduated Name: _____
 List major areas of study/degrees/certificates: _____

Employment History

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section.

Employer		Telephone ()		Dates Employed and Hourly Rates/Salary		Summarize the nature of the work performed and job responsibilities:
Address & Type of Business				From	To	
Job Title	Immediate Supervisor and Title			Starting Pay		
				\$	per	
Reason for Leaving	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			Final Pay		
				\$	per	
Employer		Telephone ()		Dates Employed and Hourly Rates/Salary		Summarize the nature of the work performed and job responsibilities:
Address & Type of Business				From	To	
Job Title	Immediate Supervisor and Title			Starting Pay		
				\$	per	
Reason for Leaving	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			Final Pay		
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Address & Type of Business				From	To	
Job Title	Immediate Supervisor and Title			Starting Pay		
				\$	per	
Reason for Leaving	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			Final Pay		
				\$	per	

As required by the OKDHS (Employment Application Supplement) YOU MUST REPORT ALL PREVIOUS FORMER EMPLOYERS WHO PROVIDED SERVICES TO CHILDREN OR ADULTS WHO ARE VULNERABLE, AND GIVING FALSE INFORMATION REGARDING MY CURRENT AND PREVIOUS EMPLOYERS MAY RESULT IN TERMINATION OF MY EMPLOYMENT. ATTACH ADDITIONAL PAGE, IF NECESSARY.

Comments (including explanation of any gaps in employment): _____

READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS IN THIS SECTION. Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, disability or veteran status, or genetic information. **Searchlight**, Inc. complies with government regulations relating to our affirmative action obligations. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, creed, religion, sex, or national origin. Federal laws also prohibit other types of discrimination, such as age, citizenship, disability, veteran status, attainment of benefits, participation in union activities, or genetic information. The laws of many states and localities also prohibit some or all of these types of discrimination, as well as prohibiting additional types of discrimination, such as discrimination based on ancestry, parental or marital status, sexual orientation, or source of income. Government agencies require periodic reports on the race, sex, ethnicity, disability and veteran status of applicants and employees. To help us comply with government record-keeping requirements, please fill out the information requested below. Providing this information is not a requirement to be considered for employment. **Information obtained through self-identification is maintained on a confidential basis**

Sex Male Female

Race Hispanic or Latino (H/L) –
Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish cultures or origins regardless of race.

White (W) –
Persons not Hispanic or Latino who have origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (B) –
Persons not Hispanic or Latino who have origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (NH/PI) –
Persons who have origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (A) –
Person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (AI/AN) –
Persons not Hispanic or Latino who have origins in any of the original peoples of North and South American (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (TW>) -
Persons not Hispanic or Latino who identify with more than one of the above five races.

Do you have a disability? Yes No

Are you a Veteran? Yes No

If yes, do you (1) qualify as a Vietnam Veteran? (VV)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(2) qualify as a Special Disabled Veteran? (SDV)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(3) qualify as Other Protected Veteran? (OPV)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(4) qualify as a Newly Separated Veteran? (NSV)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

AN EQUAL OPPORTUNITY EMPLOYER

Business / Personal References

List three business/work references that are not related to you and are not previous supervisors. If not applicable, list three school or personal references that are not related to you.

Name and Occupation	Telephone		Years Known
	Home	Work	

Other Information

List any professional or business associations, special accomplishments, awards, special skills or other experiences and any other additional information you would like us to consider. (Exclude memberships or references which would reveal sex, race, religion, national origin, age, color, disability or other protected status)

Agency Expectations

sets high standards for its employees and expects compliance with all policies and procedures. If offered a position with Think Ability, Inc., you need to carefully consider what is required of you before you accept. These standards include, but are not limited to, the following:

<p>Standards</p> <ul style="list-style-type: none"> Arriving on time every time you are scheduled. Maintaining a positive, enthusiastic attitude. Providing friendly customer service. Treating individuals and co-workers with dignity and respect. Being honest and dedicated in all your work. Maintaining confidentiality. Completing all necessary training requirements within required time frame. Following agency policies and procedures and supervisors direction. Maintaining a professional appearance and meeting the agency's dress code policy. Complying with Think Ability, Inc.' request for a minimum two weeks notice should I have to resign. 	<p>I have reviewed the "Realistic Job Preview".</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you willing and able to comply with all the requirements listed?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If your answer is no, or if you have concerns about complying with any requirements, please explain on an attached sheet.</p>
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Applicants Authorization and Statement

I affirm that the information provided on this application (and accompanying resume and/or Background and Reference Authorization form, if applicable) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information. In the event that I am given a job offer, I realize that offer is conditional upon receipt of successful results from background investigation checks. My employment status will be temporary until the investigation is complete, regardless of how long it takes.

I understand that if I am offering my time as a volunteer that I will not be compensated for any services I provide.

I understand that **Searchlight** is an Equal Opportunity Employer and does not discriminate in employment. No question on this application is used for the purpose of limiting or excusing my consideration on a basis prohibited by local, state, or federal law.

I agree to submit to any lawful drug testing that may be required as a condition of my employment or continued employment and understand that refusal to submit to such testing or receiving positive test results during the course of my employment may result in disciplinary action, up to and including discharge.

In consideration of my employment, I agree to follow the rules and regulations of **Searchlight**. I agree that my employment is "at will" and can be terminated, with or without cause, and with or without notice, at any time, at the option of either **Searchlight** or myself. I understand that no representative of **Searchlight**, other than the Executive Director or Board of Directors, has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the above.

Applicants Signature

Date

Application for Employment

I, _____ expressly authorize **SGT** to contact any and all of my employers listed on the DDS - 39. I

Print Name

release those prior employers and _____ from any and all liability arising from the information provided by my prior employers. I understand that false or misleading information may result in retraction of my application, action up to and including termination if hired and/or criminal prosecution. If hired, I further understand **SGT** complies with Oklahoma State Law and will terminate me if false or misleading information is given in order to meet the requirements for the position involved. I also understand that employment is contingent up an acceptable Motor Vehicle Report, Community Registry Check, and Oklahoma State Bureau of Investigation Report, and give **SGT** permission to run back ground checks with the aforementioned agencies/prior employers listed on DDS - 39.

Applicant's Signature

Date

Applicant's Social Security Number

Prior Employer; Please provide the following information:

Dates of Employment: Start Date: _____ End Date: _____

Position Held: _____

Duties/Responsibilities: _____

Was this person ever accused, found responsible or terminated due to abuse, exploitation, neglect or maltreatment of a person they cared for? OKLAHOMA STATUTE: TITLE 43A SECTION 10 - 103 OUTLINES WHAT IS TO BE DISCLOSED.

YES NO If, yes please provide date of the offense: _____

Is this person eligible for rehire? YES NO

This person left under the following condition:

Terminated Resigned Lack of Work Temporary Position

Signature of person completing report

Printed name of person completing report

Date



OKLAHOMA DEPARTMENT OF HUMAN SERVICES



Employment Application Supplement

Applicant (print)	Date
Provider agency <u>Searchlight Center, Inc.</u>	

As I apply for a job as a community services worker, I understand:

- prior to employing me, the community services provider is required by Oklahoma law to conduct a search of:
 - criminal history records with Oklahoma State Bureau of Investigation (OSBI); and
 - Oklahoma Department of Human Services (OKDHS) Community Services Worker Registry (Registry);
- the community services provider is prohibited by Oklahoma law from hiring, contracting with, or using as a volunteer, any person;
 - who has been convicted, pled guilty, or pled nolo contendere to misdemeanor assault and battery or a felony, except under circumstances described in OAC 340:100-3-39; or
 - whose name appears in the Registry;
- my employment may be terminated if my name appears in the Registry, even though my name may not have been in the Registry at the time of my application or hiring;
- I must report to the community services provider all of my current and previous employers who provide services to children and adults who are vulnerable; and
- giving false information regarding my current and previous employers may result in termination of my employment.

Applicant signature Date

Routing: Original – community services worker personnel record
 Copy – community services worker

