

# People's Place Employment Application

People's Place values the diverse ideas, perspectives, beliefs, experiences, and identities of our staff, clients, board members, volunteers, and others with whom we work and collaborate. People's Place does not discriminate against any employee, volunteer or consumer on the basis of race, color, cultural heritage, national origin, religion, age, sex, gender sexual orientation, marital status, disability, political affiliation, source of income, veteran status or any other status protected under local, state, or federal law. This policy extends to all personnel decisions, terms and conditions of employment, vendor contracts and provision of services. People's Place does not tolerate harassment for any reason.

**Name (First, Middle, Last)** \_\_\_\_\_ **Today's Date** \_\_\_\_\_

**Previous Name(s)** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**Address (Number, Street, Apt. #, City, State, Zip)** \_\_\_\_\_ **(Area Code) Phone No.** \_\_\_\_\_

**Position Applied For** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

**Are you bi-lingual and if so what languages do you speak?** \_\_\_\_\_

**Are you 21 years of age or older?** **YES**      **NO**

**Are you authorized to work in the U.S. on an unrestricted basis?** **YES**      **NO**

**When are you available to work? (check all that apply)**

<input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun <input type="checkbox"/> Days <input type="checkbox"/> Eve <input type="checkbox"/> Nights <input type="checkbox"/> Weekends <input type="checkbox"/> Holidays
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**Are you willing to work overtime as required?** **YES**      **NO**

**Have you ever applied for a position or worked at a People's Place II, Inc. Program?** **YES**      **NO**

**If yes, please provide details:**

## Education

**HIGH SCHOOL NAME** \_\_\_\_\_ **LOCATION** \_\_\_\_\_

**DIPLOMA/ GED (circle one)**

COLLEGE NAME	MAJOR	DEGREE	YEAR AWARDED

**OTHER EDUCATION/ TRAINING** \_\_\_\_\_

## Employment History

(Account for at least the last five (5) years of employment. Start with most recent. Please complete in full, see resume is not sufficient)

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<b>From:</b>	<b>Through:</b>	<b>How many hours a week did you work?</b> _____
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<b>Employer:</b>	<b>Address :</b>	<b>Phone:</b>
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<b>Name of Final Supervisor:</b>	<b>Phone:</b>
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**Reason for Leaving:** \_\_\_\_\_

<b>Permission to call Employer?</b>	<b>YES</b>	<b>NO</b>
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**Job Title & Brief Summary of Duties:** \_\_\_\_\_

**Population Worked With:** \_\_\_\_\_

<b>From:</b>	<b>Through:</b>	<b>How many hours a week did you work?</b> _____
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<b>Employer:</b>	<b>Address :</b>	<b>Phone:</b>
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<b>Name of Final Supervisor:</b>	<b>Phone:</b>
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**Reason for Leaving:** \_\_\_\_\_

<b>Permission to call Employer?</b>	<b>YES</b>	<b>NO</b>
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**Job Title & Brief Summary of Duties:** \_\_\_\_\_

**Population Worked With:** \_\_\_\_\_

<b>From:</b>	<b>Through:</b>	<b>How many hours a week did you work?</b> _____
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<b>Employer:</b>	<b>Address :</b>	<b>Phone:</b>
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<b>Name of Final Supervisor:</b>	<b>Phone:</b>
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**Reason for Leaving:** \_\_\_\_\_

<b>Permission to call Employer?</b>	<b>YES</b>	<b>NO</b>
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**Job Title & Brief Summary of Duties:** \_\_\_\_\_

**Population Worked With:** \_\_\_\_\_

<b>From:</b>	<b>Through:</b>	<b>How many hours a week did you work?</b> _____
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<b>Employer:</b>	<b>Address :</b>	<b>Phone:</b>
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<b>Name of Final Supervisor:</b>	<b>Phone:</b>
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**Reason for Leaving:** \_\_\_\_\_

<b>Permission to call Employer?</b>	<b>YES</b>	<b>NO</b>
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**Job Title & Brief Summary of Duties:** \_\_\_\_\_

**Population Worked With:** \_\_\_\_\_

<b>From:</b>	<b>Through:</b>	<b>How many hours a week did you work?</b> _____
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<b>Employer:</b>	<b>Address :</b>	<b>Phone:</b>
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# People's Place Employment Application

<b>Name of Final Supervisor:</b>		<b>Phone:</b>
<b>Reason for Leaving:</b>		
<b>Permission to call Employer?</b>	<b>YES</b>	<b>NO</b>
<b>Job Title &amp; Brief Summary of Duties:</b>		
<b>Population Worked With:</b>		

### References

(COMPLETE ONLY IF YOU HAVE LESS THAN THREE (3) SUPERVISORY WORK REFERENCES ABOVE.)

Name/Relationship	Occupation	Address	Telephone

**Please read the following statement carefully, and add your signature in the space provided.**

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, falsified statements, omission or misrepresentations on this application shall be considered sufficient cause for immediate termination. If I am released for this reason, I will be paid only through the day of release. I authorize the Agency to make an investigation set forth in this application and release the Agency from any liability. I understand that employment at this Agency is "at will", which means that either I or the Agency can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is considered on that basis. I understand that no supervisor, manager or executive of the Agency, other than the Executive Director, in writing, has any authority to alter the foregoing.

**I agree to release and hold harmless People's Place, Inc. and agencies/individuals listed on the application from any and all claims that I may have, or come to have, relating to background/reference checks or inquiries.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

(Revised 8/22)