****

**HANDS OF HOPE NORTHWEST**

**Employment Application**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Personal:****Full Name:** |  |  |  |  |  |  |  |  |  |  |
|  | First |  |  |  | Middle Initial | Last |  |  |  |  |

**Current Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State:** \_\_\_\_\_\_\_\_\_ **Zip:** \_\_\_\_\_\_\_\_\_

**Telephone Number:** ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **E-mail:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you 18 years of age or older? \_\_\_\_ yes \_\_\_\_ no**

**Are you legally able to work in the U.S.? \_\_\_\_ yes \_\_\_\_ no**

**Have you ever been known by any other name(s) that this organization will require to verify any of the information on this application? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you able to perform the essential functions of the position with or without accommodations?**

**\_\_\_\_ yes \_\_\_\_ no If accommodations are needed, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I am seeking a permanent position: \_\_\_\_ yes \_\_\_\_ no**

**I will be able to report to work \_\_\_\_ days after being notified I am hired.**

**Can you provide a valid driver’s license? \_\_\_\_ yes \_\_\_\_ no**

**Have you been convicted of a felony? \_\_\_\_ yes \_\_\_\_ no; if yes, describe in full: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMPOYMENT DESIRED:**

**Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date you can start: \_\_\_\_\_\_\_\_\_\_**

**Are you available for work: \_\_\_\_ Full-Time \_\_\_\_ Part-Time \_\_\_\_Temp**

**EDUCATION:**

**Do you have a High School Diploma or GED? \_\_\_\_ yes \_\_\_\_ no**

**Circle last year of school completed: 9 10 11 12 13 14 15 16 17 18**

**Circle the highest degree earned: High School GED AA Bachelor Master Doctorate**

**Area of Concentration and/or degree(s), certificates, licenses, endorsements:**

**Additional skill, including supervision skills, other languages or information regarding the employer’s career/occupation you wish to bring to the employer’s attention:**

**Typing speed: \_\_\_\_\_ per minute**

**EMPLOYMENT HISTORY**

**Former Employment: Include 10 years of employment history. (List employers, starting with the current or most recent. Explain all gaps in time of employment.)**

1. **Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: (Street) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (City) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (State) \_\_\_\_\_\_ (Zip) \_\_\_\_\_\_\_\_**

**Start Date: \_\_\_\_\_\_\_\_\_\_ End Date: \_\_\_\_\_\_\_\_\_\_ Rate of Pay: \_\_\_\_\_\_\_\_\_\_**

**Detailed Job Duties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact person for references \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Start Date: \_\_\_\_\_\_\_\_\_\_ End Date: \_\_\_\_\_\_\_\_\_\_ Rate of Pay: \_\_\_\_\_\_\_\_\_\_**

**Detailed Job Duties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**May we contact your former employers to verify this information? \_\_\_\_ yes \_\_\_\_ no**

**May we contact your present employer? \_\_\_\_ yes \_\_\_\_ no**

**EMPLOYMENT HISTORY cont’d**

1. **Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: (Street) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (City) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (State) \_\_\_\_\_\_ (Zip) \_\_\_\_\_\_\_\_**

**Start Date: \_\_\_\_\_\_\_\_\_\_ End Date: \_\_\_\_\_\_\_\_\_\_ Rate of Pay: \_\_\_\_\_\_\_\_\_\_**

**Detailed Job Duties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Detailed Job Duties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Start Date: \_\_\_\_\_\_\_\_\_\_ End Date: \_\_\_\_\_\_\_\_\_\_ Rate of Pay: \_\_\_\_\_\_\_\_\_\_**

**Detailed Job Duties: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**May we contact your former employers to verify this information? \_\_\_\_ yes \_\_\_\_ no**

**May we contact your present employer? \_\_\_\_ yes \_\_\_\_ no**

|  |
| --- |
| **The law prohibits discrimination in hiring due to age, race, color, sex, national origin, disability or veteran’s status.**  |

**INFORMATION TO THE APPLICANT**

**I understand that employment will be contingent upon the successful completion of a background investigation.**

**As part of the procedure for processing the employment application, my personal and employment references may be checked. If I have misrepresented or omitted any facts on this application, and are subsequently hired, I may be discharged from the job.**

**If necessary for employment, I may be required to supply my birth certificate or other proof of authorization to work in the United States.**

**I understand that Hands of Hope is a Christian 501 C3 non-profit organization and I will be required to: a. submit a statement of faith**

**b. identify and describe my involvement in a faith community**

**c. explain my spiritual journey relating how I have developed in my knowledge and practice of the Christian faith.**

**Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Revision date: February 2013**