

## 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	e U.S.? yes no		
Have you ever been known by an information on this application?		-	• •
Are you able to perform the esser	ntial functions of the position	with or without acc	commodations?
yes no If accommoda	tions are needed, please des	cribe:	
I am seeking a permanent positio	n: yes no		
I will be able to report to work	•	am hired.	
Can you provide a valid driver's li	icense? yes no		
Have you been convicted of a feld	ony? yes no; if ye	es, describe in full:	
EMPOYMENT DESIRED:			
Job Title:	Date	e you can start:	
Are you available for work:	Full-Time Part-Time	Temn	

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
Please send this form along with a current resume to <a href="mailto:director@handsofhopenw.org">director@handsofhopenw.org</a> or deliver to:
Hands of Hope Northwest Attention Debbie Wheeler
1201 S. Powerline Rd.
Nampa, ID 83686

## **EMPLOYMENT HISTORY**

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

1. Company Na	ıme:	Job Title	<b>)</b> :	
Address: (Street) _		(City)	(State)	(Zip)
Start Date:	End Date:	Rate of Pay:		
Detailed Job Duties	:			
Reason for Leaving	:			
Contact person for	references		_ Phone #:	
2. Company Na	ıme:	Job Title	<b>)</b> :	
Address: (Street) _		(City)	(State)	(Zip)
Start Date:	End Date:	Rate of Pay:		
Detailed Job Duties	::			
Reason for Leaving	:			
3. Company Na	ıme:	Job Title	<b>:</b> :	
Address: (Street) _		(City)	(State)	(Zip)
Start Date:	End Date:	Rate of Pay:		
Detailed Job Duties	:			
Reason for Leaving	II			
Contact person for	references		_ Phone #:	
May we contact yoเ	ır former employers t	o verify this information?	? yes no	)
May we contact vou	ır 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: April 2017