

HANDS OF HOPE NORTHWEST

Employment Application

<u>reisoliai</u> .			
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 o information on this application?	_		
Are you able to perform the essentia	al functions of the position	n with or without ac	commodations?
yes no If accommodation	ns are needed, please des	scribe:	
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 lice	nse? yes no		
Have you been convicted of a felony	7? yes no; if y	es, describe in full:	
EMPOYMENT DESIRED:			
Job Title:	Da	ate you can start:	
Are you available for work: Ful	II-Time Part-Time	Temp	Seasonal

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 5 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 #:	
2. 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			
3. 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 #:	
May we contact your former employers	to verify this information?	yes no	0
May we contact your present employer?	? ves 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	l journey relating	j how I have (developed in my	y knowledge and	practice of the
Ch	ristian faith.					

Signature of Applicant:	 Date:
oignature of Applicant.	Date

Revision date: August 2017