

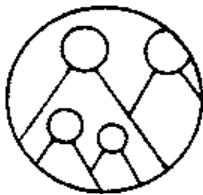
FAMILY RESOURCE & REFERRAL CENTER

Serving Communities for over 25 years

509 W. Weber Ave., Suite 101

Stockton, California 95203

Administration
Community Resource and Referral
Child Care Assistance
Early Care and Education
Child Nutrition



Phone: (209) 948-1553
Toll Free Phone: (800) 526-1555
Fax: (209) 948-3554
www.frccsj.org

Application for Employment

Please complete application fully. If an item does not apply, note "N/A". For additional employment history, request or attach an additional sheet. Do not provide information that is not requested. Providing unsolicited information will disqualify you from the employment process.

Date: _____ Position: _____

Personal Information:

Name: _____ Phone: _____

Address _____ City: _____ State: _____ ZIP: _____

Previous Addresses:

Address _____ City: _____ State: _____ ZIP: _____

Address _____ City: _____ State: _____ ZIP: _____

Emergency Contact _____ Phone: _____

Are you currently employed? Yes No When are you available to start? _____

Do you have any relatives working for Family Resource & Referral? Yes No

If yes, Name(s): _____

Are you available to work some non-traditional hours? Yes No

Are you eligible to work in the US? Yes No (you will be required to furnish proof of eligibility upon offer of employment.)

Have you ever been convicted of a crime? If yes, give details (note that conviction of a crime does not automatically disqualify you). Do not include information about crimes that have been legally sealed, expunged, or statutorily eradicated, or information about marijuana-related misdemeanor convictions that are more than two years old.

Are you under 18 years of age? Yes No

How did you hear about the opening? _____

Are you willing to take a drug test? Yes No. Current illegal drug use will disqualify you from consideration for employment. All job offers are contingent upon taking, and passing, a pre-hire drug test.

Employment History

Please list your employment history, starting with your current or most recent employer, for the last 10 years. If you have held more than one position for an employer, complete a box for each position. Account for all time, even if not employed. Please fill out all information completely.

Employer Name and Address:	From	To	Supervisor	Phone
	Starting Wage:			
	Ending Wage:			
	May We Contact:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Position and Duties:	Reason for Leaving:			

Employer Name and Address:	From	To	Supervisor	Phone
	Starting Wage:			
	Ending Wage:			
	May We Contact:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Position and Duties:	Reason for Leaving:			

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Position and Duties:	Reason for Leaving:			

Employment History Continued

Employer Name and Address:	From	To	Supervisor	Phone
	Starting Wage:			
	Ending Wage:			
	May We Contact:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Position and Duties:	Reason for Leaving:			

Employer Name and Address:	From	To	Supervisor	Phone
	Starting Wage:			
	Ending Wage:			
	May We Contact:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Position and Duties:	Reason for Leaving:			

Employer Name and Address:	From	To	Supervisor	Phone
	Starting Wage:			
	Ending Wage:			
	May We Contact:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Position and Duties:	Reason for Leaving:			

Employment History Continued

Employer Name and Address:	From	To	Supervisor	Phone
	Starting Wage:			
	Ending Wage:			
	May We Contact:		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Position and Duties:	Reason for Leaving:			

Education Information

School Name	<u>Date Graduated</u> Y or N	Course Work	Degree / Major / Certificate
High School:			
Address:			
College:			
Address:			
College:			
Address:			
Trade / Other:			
Address:			
Trade / Other:			
Address:			

Revised 09/09

References

List 3 professional references, not relatives, who have known you for at least 1 year.

<u>Name</u>	<u>Address</u>	<u>Business</u>	<u>Phone</u>	<u>Date Acquainted</u>
1.				
2.				
3.				

General Information

1. Related subjects of special study: _____

2. Special skills: _____

3. What foreign languages do you speak fluently? _____
Read fluently? _____ Write fluently? _____

Please attach a resume including your employment history and photo copies of any certificates or diplomas from your education.

If any special accommodations are needed for you to perform the essential duties of this position, please attach an additional sheet of paper describing these needs. You may contact the Agency to request an accommodation at any time in the employment process.

By signing this application, I declare that the information provided by me is complete and true to the best of my knowledge. I understand that any misrepresentation or omission on this application may preclude an offer of employment or may result in a withdrawal of an employment offer, or may result in my discharge from employment if I am already employed at the time the misrepresentation or omission is discovered. I release Family Resource & Referral Center and my former employers, references, and other sources contacted from any and all liability for references or other inquiries for the purpose of verifying information on this application or my suitability for a position with Family Resource & Referral Center.

I agree that, just as I have, if hired, the right to terminate my employment at any time, with or without cause and with or without notice, the Agency may terminate my employment at any time, with or without cause or notice. I understand that no manager or representative of the Agency, other than its Executive Director or a designee of the Executive Director, has any authority to enter into any agreement for employment for any specified period of time or make any agreement contrary to the foregoing either now, in the past, or in the future. I further understand that such an agreement must be in writing and signed by the Executive Director for it to be binding on either myself or the Agency. I further understand that this statement supersedes any prior oral or written understanding and bars any future oral understanding to the contrary. (By signing/typing your name below, you are stating that you have read, understand, and agree to the above.)

Signature

Date

Interviewer

Date

The Family Resource and Referral Center is funded by state contracts which are subject to annual review.

Notice to Applicant before Requesting Consumer Report

This is to inform you that, as part of our procedure for processing your employment application or at any time during your employment, we may obtain from a credit-reporting agency a consumer report containing financial and other information about you.

We will not obtain such a report without your signed authorization.

We comply with the Fair Credit Report Act, which provides consumers with rights regarding consumer reports and which places specific obligation on employers using credit reports.

Authorization for Employer to Obtain a Consumer Report

I authorize Family Resource and Referral Center to order a Consumer Report containing financial and other information about me from a consumer-reporting agency as part of the Company's investigation into my application for employment. I understand that, if hired, this authorization shall remain on file and shall serve as an ongoing authorization for Family Resource and Referral Center to procure consumer reports at anytime during my employment period. (By signing/typing your name here, you are stating that you understand and agree.)

Signature: _____

Print: _____

Date: _____

Disclosure Statement

I hereby acknowledge that I have read the separate disclosure statement regarding consumer reports and understand it. (By signing/typing your name here, you are stating that you understand and agree.)

Signature: _____

Print: _____

Date: _____