



## Application for Employment

Please inform us if assistance/accommodation is required in completing the application or during any part of the application process.

### AUTHORIZATION AND ACKNOWLEDGMENT

The information I have provided in this application (including all attachments) is true and correct. I understand that **if I have misrepresented or falsified information in this application or in any accompanying document or resume which I may submit in support of this application, or if I have omitted any material facts, I will not be considered for employment** by ChildNet. **If I have been hired by ChildNet, and any misrepresentation, falsification, or omission is discovered after I have begun employment, I understand that my employment by ChildNet is "at-will" and is subject to immediate termination.**

I authorize ChildNet to conduct an inquiry into the information contained in this application if I am considered for employment. I authorize my current and former employers and educational institutions to provide information about me. I hereby release all employers, educational institutions, or other individuals or entities which may provide information about me in connection with this application from all liability for issuing such information. I hereby waive any privilege I may have to such information. **I also understand that my employment is conditioned upon acceptable references and background checks and that employment is also conditioned upon drug testing.**

**I understand that ChildNet may request a consumer report in connection with this application for employment.** An investigative consumer report contains information on your character, general reputation, or personal characteristics which has been obtained through personal interviews with neighbors, friends or associates, or from others with whom you are or have been acquainted or who may have knowledge concerning any such information. I acknowledge that, if a consumer report is requested or prepared, I have the right to request a summary of my rights under the Fair Credit Reporting Act by sending a written request to ChildNet's Human Resources Department.

**I understand that nothing contained in this employment application or interview, ChildNet policies, procedures, correspondence, or manuals that I might receive constitute a contract or promise of employment or employment for any specified period of time.** I further understand that no ChildNet's policies, procedures, correspondence, or manuals establishes a contract or promise of any specific term or condition of employment between ChildNet and myself. **I understand that the employment relationship is "at-will" which means that if an employment relationship is established, ChildNet or I may terminate the employment relationship at any time and for any reason, with or without notice or prior discipline.**

I understand that ChildNet will consider this application for the open position I have specified, but for **no longer than 90 days**. I understand I am required to reapply for any other open positions at ChildNet for which I wish to be considered.

Applicant's Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

**CHILDNET IS  
A DRUG-FREE AND SMOKE-FREE WORKPLACE AND  
AN EQUAL OPPORTUNITY EMPLOYER**

Position Applied For \_\_\_\_\_  
Date Received \_\_\_\_\_  
Veteran's Preference \_\_\_\_\_  
Last Name \_\_\_\_\_  
First Name \_\_\_\_\_  
Middle Initial \_\_\_\_\_

**PERSONAL INFORMATION**

Last Name		First Name		Middle Name		Social Security Number	
Street address				Apt #		Home phone, office or message phone	
City		County		State		Zip	
Date of this application		<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours per week _____		Shift preference <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third		Date available	
				Salary desired		Are you 18 or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, age? _____	

Have you ever pled guilty or "no contest" (nolo contendere) to a crime, been convicted of a crime, had adjudication withheld, prosecution deferred, or do you have any criminal charges pending?  Yes  No If Yes, explain. Answering "yes" to this question does not constitute an automatic bar to employment. Only those crimes that are related to the position you are seeking will be considered.

Are you legally authorized to work in the U.S.? Proof will be required.  Yes  No

Can you perform the essential functions of the job for which you are applying with  or without  accommodations?

Have you previously been employed by ChildNet?  Yes  No Affiliated with predecessor organizations?  Yes  No  
If yes, provide names and dates:

Do you have any relatives currently employed by or who are officials of ChildNet?  Yes  No If yes, please provide name and position.

Are you presently or have you been a member of the U.S. Military?  Yes  No If yes, list experience and special education received in Employment Record. Are you claiming Veteran's Preference?  Yes  No If yes, please complete form attached.

**EDUCATION**

Name and location of high school		Diploma or equivalent received <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name and location of college or university		Degree	Courses/Major
Name and location of college or university		Degree	Courses/Major
Business, Technical/Vocational, Correspondence, etc.		Certificate or # of credits	Subject

Describe any other specialized training or qualifications relating to this position (i.e., seminars, military, professional affiliations, certificates or awards)

Professional licenses/certificates/CDLs (List State, License #, Class, Endorsement(s) etc.)	Expiration date:
	Expiration date:
	Expiration date:

Have you ever been denied a license or has your driver's license ever been suspended or revoked?  Yes  No If yes, provide details \_\_\_\_\_

Have you ever been cited for driving under the influence (DUI) or driving while intoxicated (DWI)?  Yes  No

**BUSINESS SKILLS**

List professional, technical or clerical skills that you would bring to the position for which you are applying (e.g., accounting, computer, inspector, maintenance, etc.):	List equipment you can operate (e.g., personal computer, flat bed truck, tanker, etc.):
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**REFERENCES** Please list business or work related references and their relationship to you

Name	Business Relationship	Telephone number
1.		
2.		
3.		

**EMPLOYMENT RECORD**

\* Please complete the following information in full.  
 \* Complete for all positions held in the last 7 years.  
 \* List most recent job first.

\* Do not use resume in place of information on application.  
 \* Include any relevant military experience and unpaid work experience  
*Use additional sheets as necessary.*

Dates of employment <b>From</b> (mo./yr.) <b>To</b> (mo./yr.)		Title of position	
Name of employing firm		Type of business	Phone
Address City	State	Zip	May we contact for references? <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Supervisor		Salary: Starting	Final
Description of duties performed, skills, accomplishments		Variable Pay <input type="checkbox"/> Yes <input type="checkbox"/> No	Average annual \$

Reason for leaving

Dates of employment <b>From</b> (mo./yr.) <b>To</b> (mo./yr.)		Title of position	
Name of employing firm		Type of business	Phone
Address City	State	Zip	May we contact for references? <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Supervisor		Salary: Starting	Final
Description of duties performed, skills, accomplishments		Variable Pay <input type="checkbox"/> Yes <input type="checkbox"/> No	Average annual \$

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Supervisor		Salary: Starting	Final
Description of duties performed, skills, accomplishments		Variable Pay <input type="checkbox"/> Yes <input type="checkbox"/> No	Average annual \$

Reason for leaving

List all other employers you have had in the last ten (10) years. \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been terminated or asked to resign from any job? If yes, please explain circumstances. \_\_\_\_\_  
 \_\_\_\_\_

Please explain any gaps in your employment history. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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\_\_\_\_\_

## PERMISSION AND RELEASE FORM FOR BACKGROUND INVESTIGATION

First Name	Middle Name	Last Name	
Former Name(s) or Alias			
Number, Street Address	City/Town	State	Zip Code
Social Security Number		Driver's License Number and State	

I hereby authorize ChildNet to obtain the following information in connection with my application for employment or if hired, at any time during my employment: **criminal and/or motor vehicle records, employment records, educational records, consumer reports, consumer investigative reports, including credit reports obtained through a consumer reporting agency.** I acknowledge that ChildNet has informed me that it may make use of this information in evaluating my application for employment, and in ChildNet's decisions regarding hiring, compensation, promotion, reassignment, retention, and other terms and conditions of my employment at ChildNet. I hereby authorize ChildNet to make use of the above-referenced information, and release ChildNet and any entity that provides information to ChildNet from liability in connection with this information.

If a **consumer investigative report** obtained through a consumer reporting agency is completed, it may include information obtained through personal interviews regarding my character, general reputation, and personal characteristics. I understand that I may obtain a complete and accurate disclosure of the nature and scope of the investigation and a summary of my rights under the Fair Credit Reporting Act by sending a written request to the Human Resource Department.

Any offers of employment are contingent upon a satisfactory background investigation. I authorize the reinvestigation of any of the above information, at any time, during my employment. **If I am employed in a position which requires a continuing satisfactory driving record, I agree to inform ChildNet of any driving or traffic violation and I understand that if my driving record is or becomes unsatisfactory, it may be a basis for termination of employment.**

**FOR USE BY HUMAN RESOURCES ONLY.** (This portion is necessary for completion of the Background Investigation.)

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Position Being Hired For: \_\_\_\_\_ Start to Work Date: \_\_\_\_\_

**PRE-EMPLOYMENT INFORMATION – Affirmative Action and Equal Employment Opportunity Information**

ChildNet is committed to equal employment opportunity for all applicants without regard to race, color, creed, religion, sex, national origin, disability, age, marital status, sexual orientation or veteran's status, or any other characteristic protected under federal, state, or local law. To help us comply with federal and state reporting and record keeping requirements, we ask that you complete the following information. This information will not be used during the hiring process and will be kept confidential.

Name: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Race/Ethnic Group:  White  Black  Hispanic  American Indian/Alaskan Native  Asian/Pacific Islander

Gender:  Male  Female

**VOLUNTARY PRE-EMPLOYMENT INFORMATION – Veteran's Preference Information**

1. VETERAN'S POINTS. Are you claiming **veteran's preference** points?  Yes  No If yes, provide a copy of your DD214, Reservists, provide a copy of your orders.
  - a. Are you a disabled veteran entitled to compensation, disability retirement benefit or pension by reason of the public laws administered by the U.S. Department of Veterans' Affairs and the Department of Defense, or have you served on active duty in any branch of service, been separated under honorable conditions, or have you established the present existence of a service-connected disability which is compensable under public laws administered by the U.S. Department of Veterans' Affairs?  Yes  No
  - b. Are you the spouse of any person who has a total disability, permanent in nature, resulting from a service-connected disability and who, because of this disability, cannot qualify for employment, or are you the spouse of any person missing in action, captured in line of duty by a hostile force or forcibly detained or interned in the line of duty by a foreign government or power?  Yes  No
  - c. Are you a veteran of any war, as defined in Florida Statutes, s. 1.019(14)?  Yes  No
  - d. Are you the unremarried widow or widower of a veteran who died of a service-connected disability?  Yes  No
2. Have you ever claimed and been employed through veterans' preference?  Yes  No If yes, provide the name of the employer.  
\_\_\_\_\_

**FOR HUMAN RESOURCES USE ONLY**

Applicant \_\_\_\_\_ Position \_\_\_\_\_