



Crittenton Services, Inc.

Believe Achieve Empower

## Application for Employment-at-Will Crittenton Services, Inc.

PERSONAL				
Last Name	First	Middle	Nickname	Date
Present Address/PO Box	City	State	Zip	Home Telephone ( )
Permanent Address/PO Box	City	State	Zip	Business Telephone ( )  May we contact you here? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you 18 years or Older? <input type="checkbox"/> Yes <input type="checkbox"/> No				Social Security #

Employment Desired	
Position applying for: _____	Date you can start
Desired Location: _____	
Days/Hours available for work: _____	
Are you employed Now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Salary Desired
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been fired or asked to resign from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Comments: _____	
Position: _____	When: _____ Location: _____
Referred by: _____	

EDUCATION				
School	Name & Location of School	Number of Years Attended	Did you Graduate?	Degree/Certificate
Graduate				
College				
Trade, Business, or Technical School				
High School				

**GENERAL**

Subjects of Special Study or Research:

Do you have any special certifications?  Yes  NoAre you licensed or license eligible?  Yes  NoDo you have Staff Supervision experience?  Yes  No # of years # of StaffDo you have computer experience?  Yes  No # of years Types of SoftwareI have experience with:  Infants/Toddlers  Adolescents  Adults  Residential programs  Home Based Programs

Other Special Skills:

Activities: (Civic, Athletic, Etc.) Exclude organizations indicating race, creed, sex, age, martial status, color or nation of origin of its members.

U.S. Military or Naval Service

Rank

Present Membership in National Guard or Reserves

**FORMER EMPLOYERS (List below your last three employers, starting with the most recent)**

Employed Month/Year	Name, Address, and phone number of employer	Salary	Position	Reason for Leaving
From: To:				
From: To:				
From: To:				
Which of these jobs did you like best?				
What did you like the most about this job?				

**REFERENCES**

(Give the name of three professional references, people not related to you, whom you have known at least one year)

Name & Address	Company	Telephone #:	Known for how long? In what capacity?

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time with or without cause.

This application is valid for 60 days.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_