

The Arc of Ventura County Application for Employment

LAST NAME	FIRST NAME	MIDDLE NAME	Today's Date
Have you ever used another name? <input type="checkbox"/> Yes <input type="checkbox"/> No			Home Phone
Names used: Street Address			Cell Phone
City, State, Zip			Email Address
Have you previously applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year: _____ Location: _____			Social Security # (optional)
Position applying for:			Pay expected
Are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No	If not, what days/hours can you work?	Available for overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	When are you able to start?
Do you have relatives or friends who are board members, employed by or receive services from The Arc of Ventura County? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Name: _____ Relationship: _____			
Is there any reason why you would be unable to perform or to safely perform any of the duties of the position for which you have applied? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____			

EDUCATION

SCHOOL	NAME & LOCATION	COURSE OR MAJOR	# YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
High School					
College					
Business, Trade or Technical					

MILITARY

Did you ever serve in the U.S. Military? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what branch?
Describe any training received during military service that may be relevant to the position for which you are applying: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	

EMPLOYMENT HISTORY

Please give an accurate and complete employment record.
Start with your present or most recent employer.

1	Employer-Company Name:		Telephone:
			Supervisor Name:
	Street Address, City, State & Zip:		Length of Employment (Month and year) From: ____ To: ____
	Title / Duties:		
	Reason for Leaving:	Hourly Rate/Salary:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
2	Employer-Company Name:		Telephone:
			Supervisor Name:
	Street Address, City, State & Zip:		Length of Employment (Month and year) From: ____ To: ____
	Title / Duties:		
	Reason for Leaving:	Hourly Rate/Salary:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
3	Employer-Company Name:		Telephone:
			Supervisor Name:
	Street Address, City, State & Zip:		Length of Employment (Month and year) From: ____ To: ____
	Title / Duties:		
	Reason for Leaving:	Hourly Rate/Salary:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
4	Employer-Company Name:		Telephone:
			Supervisor Name:
	Street Address, City, State & Zip:		Length of Employment (Month and year) From: ____ To: ____
	Title / Duties:		
	Reason for Leaving:	Hourly Rate/Salary:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employment History Continued

5	Employer-Company Name:		Telephone:
			Supervisor Name:
	Street Address, City, State & Zip:		Length of Employment (Month and year) From: ____ To: ____
	Title / Duties:		
	Reason for Leaving:	Hourly Rate/Salary:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
6	Employer-Company Name:		Telephone:
			Supervisor Name:
	Street Address, City, State & Zip:		Length of Employment (Month and year) From: ____ To: ____
	Title / Duties:		
	Reason for Leaving:	Hourly Rate/Salary:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

SPECIAL SKILLS & QUALIFICATIONS

Summarize any special job-related skills and qualifications you may have acquired from employment or other experiences.

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REFERRAL

Mark all that apply

<input type="checkbox"/>	Walk-in	<input type="checkbox"/>	Employee Referral (Specify):	
<input type="checkbox"/>	Employment Agency	<input type="checkbox"/>	School (Specify):	
<input type="checkbox"/>	EDD/State Job Service	<input type="checkbox"/>	Other Company Referral (Specify):	
<input type="checkbox"/>	Advertisement	<input type="checkbox"/>	Other (Specify):	

REFERENCES

Give name, address and telephone number of at least three references who are not related to you and are not previous employers.

1.
2.
3.

NOTICES & CERTIFICATIONS

EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER: The Arc of Ventura County provides equal employment opportunities to all employees and qualified applicants for employment and prohibits discrimination on the basis of race, color, national origin or ancestry, age, religion, creed, physical or mental disability, medical condition, sex, sexual orientation, marital status, pregnancy, citizenship, military status, or any other characteristic protected by federal, state or local law, except where a bona fide occupational qualification applies. This policy applies to recruitment, selection, placement, training, promotion, demotion, compensation and benefits, work schedules and job assignments, social and recreational programs, transfer, layoff and recall, termination, and all other aspects of employment.

Initial to acknowledge: _____

BACKGROUND & REFERENCE CHECK: As part of its employment screening and selection procedures, The Arc of Ventura County requires background and reference checks for employees. Furnishing the information requested is mandatory. Failure to provide the information may delay or prevent completion of the application process. All applicants must complete a separate DISCLOSURE AND AUTHORIZATION TO OBTAIN INFORMATION form.

In determining an applicant's suitability for employment where the applicant has criminal convictions on his/her record, consideration will be given to the specific duties of the position and the nature of the offense(s). Misrepresentation, falsification, or material omission of information in this application may result in the failure to receive an offer, or if hired, dismissal from employment.

Have you ever been convicted of a crime (felony or misdemeanor) OTHER THAN (1) a marijuana-related conviction that occurred more than two years ago; and (2) an offense for which you were referred to, and participated in, any pre-trial or post-trial diversion program? Yes No

If yes, please state the date of conviction, the county and state, and the nature of the offense. (Continue on back if necessary.)

DRUG & ALCOHOL FREE WORKPLACE: The Arc of Ventura County maintains a Drug & Alcohol Free Workplace. All offers of employment are contingent upon a successful pre-employment drug screen. Refusing to consent to a pre-employment drug screen is considered a voluntary withdrawal from the employment process.

Initial to acknowledge: _____

PRE-EMPLOYMENT PHYSICAL: All offers of employment with The Arc of Ventura County are contingent upon successful results of a medical physical which determines the ability to perform the essential duties of the position and includes a TB test.

Initial to acknowledge: _____

AT-WILL POLICY: Employment with The Arc of Ventura County is "at will." This means that both the agency and the employee have the right to terminate the employment relationship at any time, with or without prior notice or cause, for any reason not expressly prohibited by law. Nothing in this document or any agency document should be understood as creating guaranteed or continued employment, a requirement that "cause" exist before termination, or any other guaranteed or continued benefits. The at-will relationship can be changed only by an express individual written employment agreement signed by the Chief Executive Officer.

Initial to acknowledge: _____

CERTIFICATION AND SIGNATURE

I hereby certify that the information contained in this application form is true and correct to the best of my knowledge. I understand that any misrepresentation, falsification, or material omission of information on this application or on my resume may result in rejection of the application or termination of my employment, if hired. In connection with my suitability for employment, I authorize The Arc of Ventura County to check all personal and employment references.

Signature of Applicant & Date

VOLUNTARY IDENTIFICATION INFORMATION PRE-EMPLOYMENT

Please print

LAST NAME	FIRST NAME	TODAYS DATE
POSITION APPLYING FOR:		

The Arc of Ventura County provides equal employment opportunities to all employees and qualified applicants for employment and prohibits discrimination on the basis of race, color, national origin or ancestry, age, religion, creed, physical or mental disability, medical condition, sex, sexual orientation, marital status, pregnancy, citizenship, military status, or any other characteristic protected by federal, state or local law, except where a bona fide occupational qualification applies. This policy applies to recruitment, selection, placement, training, promotion, demotion, compensation and benefits, work schedules and job assignments, social and recreational programs, transfer, layoff and recall, termination, and all other aspects of employment.

THIS INFORMATION IS USED FOR REPORTING TO GOVERNMENTAL AGENCIES ONLY. IT IS NOT USED IN DETERMINING ELIGIBILITY FOR EMPLOYMENT AND IS KEPT SEPARATE FROM THE APPLICATION FORM.

GENDER

<input type="checkbox"/> Male	<input type="checkbox"/> Female
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ETHNICITY /RACE Select one or more values.

<input type="checkbox"/>	Hispanic or Latino A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
<input type="checkbox"/>	White A person having origins in any of the original peoples of Europe, the Middle East or North Africa. (Not Hispanic or Latino.)
<input type="checkbox"/>	Black or African American A person having origins in any of the black racial groups of Africa. (Not Hispanic or Latino.)
<input type="checkbox"/>	Native Hawaiian or Other Pacific Islander A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. (Not Hispanic or Latino.)
<input type="checkbox"/>	Asian A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. (Not Hispanic or Latino.)
<input type="checkbox"/>	American Indian or Alaska Native A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment. (Not Hispanic or Latino.)
MILITARY STATUS	<input type="checkbox"/> Special Disabled Veteran (i) A veteran of the U.S. military who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans' Affairs for a disability (A) rated at 30% or more, or (B) rated at 10 to 20% in the case of a veteran who has been determined under §38 U.S.C. 3106 to have a serious employment handicap or (ii) a person who was discharged or released from active duty because of a service-connected disability.
	<input type="checkbox"/> Veteran of the Vietnam Era A person who (i) served on active duty in the U.S. military for a period of more than 180 days, and who was discharged or released there from with other than a dishonorable discharge, if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all other cases or (ii) was discharged or released from active duty in the U.S. military for a service-connected disability if any part of such active duty was performed in (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in any other location.
	<input type="checkbox"/> Newly Separated Veteran A veteran who served on active duty in the U.S. military during the one-year period beginning on the date of such veteran's discharge or release from active duty.
	<input type="checkbox"/> Other Protected Veteran A veteran who served on active duty in the U.S. military during a war or in a campaign or expedition for which a campaign badge has been authorized.