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| S:\Deirdre's House Logos\Deirdre's House Logo.jpg | Deirdre’s House8 Court StreetMorristown, NJ 07960973-631-5000www.deirdreshouse.org |

# Employment Application

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last  | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date Available: |  |  DOB.: |  |

|  |  |
| --- | --- |
| Position Applied for: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you bilingual? | Yes [ ]  | No [ ]  | Language:  |
| Other Skills: |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you a citizen of the United States? | YES[ ]  | NO[ ]  | If no, are you authorized to work in the U.S.? | YES[ ]  | NO[ ]  |

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever been convicted of a felony? | YES[ ]  | NO[ ]  | If yes, please explain: |
| Have you ever been substantiated for abuse Child Protective Services | [ ]  | [ ]  | If yes, please explain: |

|  |  |
| --- | --- |
| If yes, explain: |  |

## Education

|  |  |  |  |
| --- | --- | --- | --- |
| High School: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Diploma:: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |

|  |
| --- |
|  |

GPA:

|  |  |  |  |
| --- | --- | --- | --- |
| Other: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |
|  |  |  |  |  |  |  |  |  |

## References

Please list three professional references.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |

## Previous Employment

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  |  |  |  |  |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  |  |  |  |  |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  |  |  |  |  |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |

## Community Involvement

|  |  |  |  |
| --- | --- | --- | --- |
| Do/Did you hold elected position? | Yes [ ]  |  No [ ]  | Position held:\_\_\_\_\_\_\_\_\_\_ |
| Are you currently a member of any professional, community, political, or social organization? | Yes [ ]  |  No [ ]  | Name: Name:Name: |
| Please describe any prior volunteer experiences: |

Statement of Understanding

***I understand that I will be subject to fingerprinting as part of a criminal background check that will be completed as part of this application process and may be conducted annually thereafter while employed at Deirdre’s House. I grant permission to Deirdre’s House to contact the references I have provided and other persons deemed necessary. I understand that Deirdre’s House may also conduct a check of my driving record through the New Jersey Motor Vehicle Commission as part of the application procedure. Deirdre’s House reserves the right to deny acceptance of any applicant without stating a reason. All information provided on this application is accurate to the best of my knowledge and remains the sole, confidential property of Deirdre’s House.***

***I hereby swear that the above information is true and valid to the best of my knowledge. I understand that any falsification of the above information may result in termination of my position with Deirdre’s House.***

Name of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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