

THE CHILDREN'S CENTER OF HAMDEN, INC.

1400 Whitney Avenue • Hamden, CT • 06517 • (203) 248-2116

APPLICATION FOR EMPLOYMENT

The Children's Center of Hamden, Inc. is an **Affirmative Action / Equal Opportunity Employer**

PLEASE PRINT ALL INFORMATION (Except Signature)					Date:			
Name:	(Last)		(First)		(Middle)			
Present Address:	(Street)		(Apt #)	(City)	(State)		(Zip)	
Telephone:								
Have you ever applied here before?					(Circle One)		Yes No	
Have you ever been employed here before?					(Circle One)		Yes No	
If you were employed or attended school under a different name, please include:								
Are you 18 years of age or older?					(Circle One)		Yes No	
Are you lawfully eligible to work in the United States?					(Circle One)		Yes No	
Federal law requires all employees to provide documentation of identity and employment eligibility								
Specific Position Desired:			Direct Care Worker Shift Preference					
Days Available:	MON		FRI		1 st	6:30 a.m. – 2:30 p.m.		
	TUE		SAT		2 nd	2:30 p.m. – 10:30 p.m.		
	WED		SUN		3 rd	10:30 p.m. – 6:30 a.m.		
	THURS							
Type of Education	Name of School			Location		# of Years Completed		# of Credits or Degree Achieved
High School								
College								
Business or Trade School								
Other								
Do you hold any professional licenses?				(Circle One) Yes No				
If so, are you registered/certified in Connecticut?				(Circle One) Yes No			Registration Certification #	
Are you registered/certified in other states?				(Circle One) Yes No			Registration Certification #	
State briefly why you feel qualified for this position:								
The following information will only be considered relevant to the position for which you are applying								
Driver's License #		State		Is your license valid?	(Circle One) Yes No			
Have you ever been investigated by DCF (The Department of Children & Families)					(Circle One) Yes No			
Note: A record of a criminal conviction is not an automatic bar to employment. Factors such as the nature of the offense, the date of the offense, and the applicant's degree of rehabilitation will be taken into consideration by The Children's Center of Hamden								
Are you a Veteran?				U.S Military Branch of Service:				
Are you currently active in the Reserves?	(Circle One) Yes No							
Dates of Service:	From:		To:					

Starting with your most recent position, state your last 3 employment experiences

Name of Employer:				
City:		State:		Zip:
Phone Number:				
May we contact your present employer?	(Circle One)	Yes	No	
Reason for Leaving:				
Duties & Responsibilities:				
Supervisor's Name:			Supervisor's Phone:	
Employment Dates:	From:	To:		

Name of Employer:				
City:		State:		Zip:
Phone Number:				
May we contact this employer?	(Circle One)	Yes	No	
Reason for Leaving:				
Duties & Responsibilities:				
Supervisor's Name:			Supervisor's Phone:	
Employment Dates:	From:	To:		

Name of Employer:				
City:		State:		Zip:
Phone Number:				
May we contact this employer?	(Circle One)	Yes	No	
Reason for Leaving:				
Duties & Responsibilities:				
Supervisor's Name:			Supervisor's Phone:	
Employment Dates:	From:	To:		

How did you hear about the job opening?	(Circle One)	Agency Website	CareerBuilder	Facebook	Friend	Other
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Do you have any relatives/friends who currently work for The Children's Center?	(Circle One)	Yes	No
If YES, please provide names:			

Please list the names of two individuals, other than relatives, who would be able to provide references about you

Name:		Phone:		Relationship:	
Name:		Phone:		Relationship:	

- I understand that The Children's Center of Hamden, Inc. follows an "Employment at Will" policy, in that I or The Children's Center of Hamden, Inc. may terminate my employment at any time and for any reason. I understand that this application is not a contract of employment. I further understand that no representative of The Children's Center of Hamden, Inc. is authorized to make any oral or written representation contrary to this "Employment at Will" policy and that such representations, if made, are not binding on The Children's Center of Hamden, Inc.
- I also understand, if offered employment, that I am required to submit to drug testing and will be required to complete a physical exam and, if applicable, a physical demand screen. The Children's Center of Hamden, Inc. also reserves the right to test employees where reasonable suspicion of drug/alcohol usage, adversely affecting job performance, exists.
- I, the undersigned, also certify that the information provided in this application is true and correct to the best of my knowledge and belief. I understand and agree that any misrepresentation or falsification of this information may be cause for denial of employment or immediate dismissal.
- I, also authorize The Children's Center of Hamden, Inc. to contact my former employers and schools to investigate my work history and qualification for the position for which I am applying. I release all parties involved from any liability arising there from.

Signature:		Date:	
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