

EMPLOYMENT RECORD

Beginning with your **present** (or **last**) employer, list all previous employment, including military service.

Name of employer		Address		Type of business	
Name of immediate supervisor			Supervisor's title and telephone number		
Title of your position			Reason for leaving		
Starting date	Final date	Starting pay	Final pay	Hours worked per week	
Duties					
May we contact your present employer? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No [<input type="checkbox"/>] Please contact me first					

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GENERAL INFORMATION

Have you ever been suspended or discharged from a position? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No If yes, please explain:
Have you ever been the subject of a Child Protection Service investigation? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No
Have you ever been employed by St. Ann's Center for Children, Youth and Families? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No If yes, give dates of employment and departments:
Are you related to anyone employed by St. Ann's Center for Children, Youth and Families? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No If yes, please give employee's name.
Which source referred you to St. Ann's Center for Children, Youth and Families?(Please be specific) St. Ann's Employee [<input type="checkbox"/>] St. Ann's Career Page [<input type="checkbox"/>] Walk-In [<input type="checkbox"/>] Newspaper Ad [<input type="checkbox"/>] Other Placement Service [<input type="checkbox"/>] Other:
PROOF OF U.S. CITIZENSHIP OR WORK AUTHORIZATION STATUS WILL BE REQUIRED UPON EMPLOYMENT Are you eligible to work in the U.S.? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No

JOB RELATED SKILLS

Foreign language skills:
Please list Computer/Word Processing Skills Computer Skills: Basic [<input type="checkbox"/>] Intermediate [<input type="checkbox"/>] Excellent [<input type="checkbox"/>] Computer Programs you are Familiar With: Professional Certificates (job related): Other Skills:

PROFESSIONAL REFERENCES

Please give the names of people who could provide a reference regarding your suitability for the post for which you are applying.

NAME	TITLE	COMPANY	TELEPHONE NO./ EMAIL ADDRESS

I understand that (1) falsification, misrepresentation or omission of information in this application may result in disqualification from further consideration of employment and if employed, may result in discipline or dismissal; (2) employment is subject to satisfactory references and employment checks including criminal background checks made to persons or entities deemed appropriate by St. Ann's; (3) employment at St. Ann's is 'at will' unless otherwise defined.

I give permission for St. Ann's to obtain and review information pertaining to my background, without limitation. I understand that St. Ann's programs involve working with children. Hence, all employees are required to have additional background checks including fingerprinting, health screening, and drug testing so as to comply with Federal, State, and District of Columbia regulations.

I request and authorize those entities contacted in connection with my application to provide St. Ann's with all information that they believe may be relevant. Further, I waive any claims that I might otherwise hereafter have against St. Ann's, its agents and officials, or against anyone who provides such information.

Print Name

Signature

Date