

(NOTE: This application should be completed **even though a resume is attached** – the application is frequently used as a preliminary screening device.)

Read the experience requirements in the job announcement before completing this section. Begin with your most recent job. List all jobs, and any periods of unemployment, in the last ten years. Also, list any jobs you held more than ten years ago, which relate to the duties of the job for which you are applying. Also, list any volunteer experience, which relates to the job for which you are applying. Attach additional sheets if necessary. This application is not a contract of employment. Any individual may voluntarily leave employment upon proper notice and may be terminated by the agency at any time for any reason. Any oral or written statements or promises to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee.

EXPERIENCE:

Name of present or last employer:	Your Title: _____ Supervisor Name & E-mail: _____	
Address: _____	Your Duties: _____	
Phone Number: _____ Fax Number: _____		
Dates: from _____ to _____ Salary: _____ Hrs./wk. _____		
Reason for leaving:		
Name of employer:	Your Title: _____ Supervisor Name & E-mail: _____	
Address: _____	Your Duties: _____	
Phone Number: _____ Fax Number: _____		
Dates: from _____ to _____ Salary: _____ Hrs./wk. _____		
Reason for leaving:		
Name of employer:	Your Title: _____ Supervisor Name & E-mail: _____	
Address: _____	Your Duties: _____	
Phone Number: _____ Fax Number: _____		
Dates: from _____ to _____ Salary: _____ Hrs./wk. _____		
Reason for leaving:		
Name of employer:	Your Title: _____ Supervisor Name & E-mail: _____	
Address: _____	Your Duties: _____	
Phone Number: _____ Fax Number: _____		
Dates: from _____ to _____ Salary: _____ Hrs./wk. _____		
Reason for leaving:		
I certify that all information provided is true to the best of my knowledge	DO NOT WRITE HERE	
	Approved by:	_____
	Rejected by:	_____
	Date:	_____
Signature of Applicant	Reason:	_____
Date		

ANY ADDITIONAL MATERIALS SUBMITTED WITH YOUR APPLICATION BECOME THE PROPERTY OF NHA AND WILL NOT BE RETURNED. PLEASE MAKE SURE YOU KEEP A COPY OF ALL DOCUMENTS SUBMITTED (EXCEPT OFFICIAL TRANSCRIPTS) FOR YOUR RECORDS.



Neighborhood House Association

Administrative Offices

Human Resources Department

5660 Copley Drive • San Diego, CA 92111 • Voice (858) 715-2642 • Fax (858) 715-2677

CHAIRPERSON
W. Harold Tuck

PRESIDENT & CEO
Rudolph A. Johnson, III

AUTHORIZATION FOR RELEASE OF INFORMATION

I _____ Social Security Number _____

(Please Print Name)

hereby authorize Neighborhood House Association to thoroughly investigate my reference, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the agency any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the agency, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Date

Applicant's Signature

APPLICATION SURVEY FORM

Neighborhood House Association is an equal opportunity employer. We must demonstrate that we meet equal employment opportunity requirements by reporting statistical information about applicants. The confidential information requested below is necessary for our reporting requirements. This information will be kept separate from other papers and will not be used in any way to make employment decisions. Your participation is voluntary and would be greatly appreciated.

Position applied for _____

Please check the appropriate box:

- Female Male Physical/Mental/Medical Conditions

Race or Ethnic Group

1. Hispanic: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
2. Black or African American (not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.
3. White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
4. Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
5. Asian (Not Hispanic or Latino): 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.
6. American Indian or Alaska Native (Not Hispanic or Latino): 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.
7. Two or More Races (Not Hispanic or Latino): All persons who identify with more than one of the above five races.

Referral Source

- Head Start Parent Volunteer
- Newspaper, magazine Community organization _____
- Employment agency _____ Personal referral, another employee

Immigration Information

If offered employment, you will be required to complete an employment eligibility verification form and submit documents verifying your identity and your right to work in the United States. Documents that establish both requirements include one of the following:

- U.S. Passport
 - Unexpired foreign passport with attached employment authorization
 - Certificate of Citizenship
 - Resident alien card
 - Certificate of naturalization
- Otherwise, you must provide one document of the following to establish your employment authorizations:
- Social Security card
 - United States birth certificate
 - Unexpired INS employment authorization

And one of the following to establish your identity:

- State issued Driver's License or ID Card with a photograph or other identifying information
- United States Military Card