

# NEIGHBORHOOD HOUSE ASSOCIATION

Please submit to: 5660 Copley Drive  
San Diego, CA 92111  
**Telephone (858) 715-2642**  
**[www.neighborhoodhouse.org](http://www.neighborhoodhouse.org)**

## APPLICATION FOR EMPLOYMENT

JOB INTEREST	TODAY'S DATE			I AM AVAILABLE FOR:		<input type="checkbox"/> Full-Time Employment																																																									
	MO.	DAY	YEAR			<input type="checkbox"/> Part-Time Employment																																																									
					<input type="checkbox"/> Temporary Employment																																																										
<b>INSTRUCTIONS: READ CAREFULLY – ANSWER ALL QUESTIONS. IT IS IN YOUR BEST INTEREST TO MAKE A COMPLETE AND UP-TO-DATE STATEMENT OF YOUR PERSONAL HISTORY AND QUALIFICATIONS. ANY FALSE STATEMENT OR ANSWER MAY BE CAUSE FOR REJECTION OR FOR DISCHARGE AFTER APPOINTMENT. PLEASE PRINT IN INK OR USE TYPEWRITER.</b>																																																															
POSITION APPLIED FOR:				JOB CODE:		SOCIAL SECURITY NUMBER																																																									
<input type="checkbox"/> Mr.		NAME: LAST		FIRST		MIDDLE																																																									
<input type="checkbox"/> Mrs.																																																															
<input type="checkbox"/> Ms.																																																															
PERSONAL	PRESENT ADDRESS: NUMBER – STREET - APT. NO.						HOME TELEPHONE																																																								
							Area	Number																																																							
	CITY STATE ZIP CODE						CELL PHONE																																																								
							Area	Number																																																							
	MAILING ADDRESS (If different from above)						ARE YOU:																																																								
	Email Address:						Over 18 years old? YES <input type="checkbox"/> NO <input type="checkbox"/>																																																								
							ARE YOU:																																																								
						Head Start Parent? YES <input type="checkbox"/> NO <input type="checkbox"/>																																																									
HAVE YOU EVER WORKED FOR NEIGHBORHOOD HOUSE ASSOCIATION?																																																															
Yes <input type="checkbox"/> No <input type="checkbox"/> (Prior work experience and the circumstances related to your leaving NHA will be a factor in determining if you are rehirable)																																																															
If yes, list dates & title of position(s): _____																																																															
Was this through a staffing agency? If yes, please indicate name of agency. _____																																																															
List all pending and prior criminal arrests and charges related to child sexual abuse and their disposition.				DO YOU HAVE ANY RELATIVES WORKING FOR NHA? Yes <input type="checkbox"/> No <input type="checkbox"/>																																																											
_____																																																															
Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state nature of the crime(s), when and where convicted and disposition of the case.				If yes, state name & relationship: _____																																																											
CERTIFICATION/ SKILLS	LIST YOUR DRIVER'S LICENSE NUMBER AND OTHER LICENSES/CERTIFICATES REQUIRED BY THE JOB ANNOUNCEMENT:																																																														
REFERENCES	LANGUAGES OTHER THAN ENGLISH:																																																														
	Please note your knowledge of any foreign languages and indicate your level of competence in each by placing an "X" in the appropriate column																																																														
	<table border="1"><thead><tr><th rowspan="2">LANGUAGE(S)</th><th colspan="3">Reading</th><th colspan="3">Speaking</th><th colspan="3">Understanding</th><th colspan="3">Writing</th></tr><tr><th>Fluent</th><th>Good</th><th>Fair</th><th>Fluent</th><th>Good</th><th>Fair</th><th>Fluent</th><th>Good</th><th>Fair</th><th>Fluent</th><th>Good</th><th>Fair</th></tr></thead><tbody><tr><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></tbody></table>												LANGUAGE(S)	Reading			Speaking			Understanding			Writing			Fluent	Good	Fair	Fluent	Good	Fair	Fluent	Good	Fair	Fluent	Good	Fair		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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GIVE NAME, TELEPHONE NUMBER, E-MAIL ADDRESS OF THREE (3) PROFESSIONAL REFERENCES:																																																															
EDUCATION	High School	Name and Address		No. of years completed		Did you graduate?		Diploma or GED Certificate																																																							
						Yes <input type="checkbox"/> No <input type="checkbox"/>																																																									
	NAME & LOCATION OF COLLEGES OR VOCATIONAL AND/OR BUSINESS SCHOOLS ATTENDED																																																														
			DATES ATTENDED	CREDITS COMPLETED Sem./Qtr. Units	MAJOR SUBJECT OR COURSE		UNITS COMPLETE IN MAJOR		DEGREE/ CERTIFICATE																																																						
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			to:																																																												
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### Equal Opportunity Employer

It is the policy and practice of the Neighborhood House Association to select and promote employees based on their qualifications and ability to do the job without regard to sex, actual or perceived sexual orientation, race, color, religious creed, national origin, physical disability/ mental disability, medical condition, age, pregnancy and marital status.

(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. NHA is an at-will employer. 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: _____ Address: _____ Phone Number: _____ Fax Number: _____ Dates: from _____ to _____ Salary: _____ Hrs./wk. _____ Reason for leaving: _____	Your Title: _____ Supervisor Name _____ & E-mail: _____ Your Duties: _____								
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I certify that all information provided is true to the best of my knowledge.  The successful clearance of a background check is required by all applicants applying for employment with NHA before any formal offer of employment can be extended. By signing this application you are giving NHA permission and authorizing without further notice to conduct all necessary background checks. These background checks may include but are not limited to FBI, DOJ, Child Abuse, Social Security Number Verification, National Criminal and sex offender search and county criminal records.  _____ <b>Signature of Applicant:</b> <b>Date:</b> _____	<div style="text-align: center; border: 1px solid black; padding: 5px;"><b>DO NOT WRITE HERE</b></div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><b>Approved by:</b></td> <td></td> </tr> <tr> <td><b>Rejected by:</b></td> <td></td> </tr> <tr> <td><b>Date:</b></td> <td></td> </tr> <tr> <td><b>Reason for Rejection:</b></td> <td></td> </tr> </table>	<b>Approved by:</b>		<b>Rejected by:</b>		<b>Date:</b>		<b>Reason for Rejection:</b>	
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<b>Date:</b>									
<b>Reason for Rejection:</b>									

ANY ADDITIONAL MATERIALS SUBMITTED WITH YOUR APPLICATION BECOME THE PROPERTY OF NHA AND WILL NOT BE RETURNED.



## Neighborhood House Association

Administrative Offices

Human Resources Department

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

CHAIRPERSON  
Vic Baker

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 forms 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 (I-9 Form) and submit documents verifying your identity and your right to work in the United States. You will be provided with a list of documentation options at time of hire.