NEIGHBORHOOD HOUSE ASSOCIATION

5660 Copley Drive
San Diego, CA 92111
Phone: (858) 715-2642 / Web: www.neighborhoodhouse.org

APPLICATION FOR EMPLOYMENT

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 FILL OUT THE FORM ELECTRONICALLY OR PRINT IN INK. SUBMIT COMPLETED APLICATION PACKAGE TO THE ADDRESS ABOVE OR EMAIL TO: *RECRUITING@NEIGHBORHOODHOUSE.ORG.*

JOB

TODAY'S DATE			POSITION APPLIED FOR:	POSITION NO.:
MO.	DAY	YEAR		I AM AVAILABLE FOR: ☐ Full-Time Employment ☐ Temporary Employment ☐ Part-Time Employment ☐ Substitute/ On- Call Employment

PERSONAL INFORMATION

☐ Mr. ☐ Mrs. ☐ Ms.	NAME: LAST	FIRST	M.I.
CURRENT ADDRESS: NUMBER – STREET - APT. NO.		CITY, STATE / ZIP	HOME PHONE:
MAILING ADDRESS *(If different from above)*			CELL PHONE:
Email Address:		ARE YOU AT LEAST 18 YEARS OF AGE? ☐ YES ☐ NO	

HAVE YOU EVER WORKED FOR NEIGHBORHOOD HOUSE ASSOCIATION? ☐ YES ☐ NO
(Prior work experience and the circumstances related to your leaving NHA will be a factor in determining if you are eligible for rehire.)

If yes, list dates & title of position(s): _____

Was this through a staffing agency? If yes, please indicate name of agency. _____

DO YOU HAVE ANY RELATIVES WORKING FOR NHA? ☐ **YES** ☐ **NO**

If yes, state name & relationship:_____

ARE YOU A CURRENT OR FORMER HEAD START PARENT, VOLUNTEER, OR PROGRAM PARTICIPANT? ☐ YES ☐ NO

Have you ever been convicted of a criminal offense (felony or misdemeanor)? ☐ YES ☐ NO

If yes, state nature of the crime(s), when and where convicted and disposition of the case.

_____

_____

List all pending and prior criminal arrests and charges related to child sexual abuse and their disposition.

_____

_____

CERTIFICATIONS/ SKILLS

LIST YOUR DRIVER'S LICENSE NUMBER AND OTHER LICENSES/CERTIFICATES REQUIRED BY THE JOB ANNOUNCEMENT:

LANGUAGES OTHER THAN ENGLISH:
Please note your knowledge of any foreign languages and indicate your level of competence by writing "fluent," "good," or "fair" in the appropriate columns.

LANGUAGE(S)	Reading			Speaking			Comprehending			Writing		
	Fluent	Good	Fair	Fluent	Good	Fair	Fluent	Good	Fair	Fluent	Good	Fair

EDUCATION

HIGH SCHOOL NAME & ADDRESS	DID YOU GRADUATE? ☐ YES ☐ NO	DIPLOMA OR GED CERTIFICATE:

NAME & LOCATION OF COLLEGES OR VOCATIONAL AND/OR BUSINESS SCHOOLS ATTENDED

NAME & LOCATION	DATES ATTENDED	MAJOR SUBJECT OR COURSE	# CREDITS COMPLETED	DEGREE/ CERTIFICATE RECEIVED
	From: To:			
	From: To:			
	From: To:			

REFERENCES

PROVIDE CONTACT INFORMATION FOR TWO (2) PROFESSIONAL & ONE (1) PERSONAL REFERENCE:

FULL NAME:	PHONE NUMBER:	EMAIL ADDRESS:

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.

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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. List all jobs, and any periods of unemployment. 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.

EMPLOYMENT AND/ OR VOLUNTEER EXPERIIENCE

LIST YOUR EMPLOYMENT AND/ OR VOLUNTEER EXPERIENCE FOR THE PAST 5 YEARS BEGINNING WITHYOUR CURRENT OR MOST RECENT EMPLOYER.

Name & address of employer:		**Your Title:**
Phone Number:		**Supervisor Name & E-mail:**
Dates of employment: From: / To:		**May we contact?** ☐ **YES** ☐ **NO**
Starting salary: $	**Ending salary: $**	**Reason for leaving:**

Description of duties:
_____
_____
_____
_____
_____
_____

Name & address of employer:		**Your Title:**
Phone Number:		**Supervisor Name & E-mail:**
Dates of employment: From: / To:		**May we contact?** ☐ **YES** ☐ **NO**
Starting salary: $	**Ending salary: $**	**Reason for leaving:**

Description of duties:
_____
_____
_____
_____
_____
_____

Name & address of employer:		**Your Title:**
Phone Number:		**Supervisor Name & E-mail:**
Dates of employment: From: / To:		**May we contact?** ☐ **YES** ☐ **NO**
Starting salary: $	**Ending salary: $**	**Reason for leaving:**

Description of duties:
_____
_____
_____
_____
_____
_____

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.
Signature & date of applicant: _____

HR USE ONLY

Application Status: ☐ **APPROVED** ☐ **REJECTED**

Reason for Rejection:

Selected for interview: ☐ **YES** ☐ **NO**

If yes, interview date/ time:

COMMENTS:

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APPLICANT NAME:	**DATE:**
POSITION APPLIED FOR:	**POSITION NO.:**

AUTHORIZATION FOR RELEASE OF INFORMATION

I 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.

Applicant's Signature:	**Date:**	**Social Security Number:**

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.

Please check the appropriate box: ☐ **FEMALE** ☐ **MALE**

Are you considered a Disabled individual: a person with a physical or mental impairment which substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment? ☐ **YES** ☐ **NO**

Please indicate your Ethnic Group:

☐ Hispanic: Persons of Cuban, Mexican, Puerto Rican, South/Central American, or other Spanish culture /origin regardless of race.
☐ Not Hispanic or Latino

Please indicate your Race:

☐ **American Indian or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment
☐ **Asian:** 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
☐ **Black or African American:** A person having origins in any of the black racial groups of Africa.
☐ **Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
☐ **White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa
☐ **Two or More Races (Not Hispanic or Latino):** All persons who identify with more than one of the above five races.
Indicate races below:
a. _____ b. _____ c. _____ d. _____

JOB REFERRAL SOURCE

☐ NHA Website (www.neighborhoodhouse.org)
☐ Indeed.com / Jobing.com
☐ Jobs @ Head Start
☐ Head Start Parent/ Volunteer
☐ CALSAC.org (CA School Age Consortium)
☐ Craigslist
☐ Newspaper, magazine
☐ Glassdoor.com
☐ Employee Referral: _____
☐ NPworks.org
☐ Community College/ University Website: _____
☐ Other: _____
☐ Employment agency: _____

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.

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