



# EMPLOYMENT APPLICATION

Equal Opportunity Employer

### APPLICANT INFORMATION:

Date of Application: \_\_\_\_\_

Full Legal Name: (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

Position Applied For: \_\_\_\_\_ Date Available for Work \_\_\_\_\_

Residence Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Night Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Social Security #: \_\_\_\_\_ If applying for a direct care position, are you over the age of 21? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have the legal right to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_ Have you ever applied here before? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

Have you ever been employed here? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_ What Position(s)? \_\_\_\_\_

**EDUCATION AND LICENSING:** Include high school, vocational school and colleges you have attended. All educational claims are subject to verification. Transcripts may be requested at a later time.

Name of School	City/State	Years Completed	Diploma or Degree	Area of Study

List any professional or occupational licenses (include the license number, issuing state, and expiration date), certificates, certifications or registrations you hold:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### BACKGROUND:

Have you ever been convicted of, or pled guilty, or "no contest" to a felony? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, state the offense, date, court, city and state where conviction occurred.

\_\_\_\_\_  
\_\_\_\_\_

*Note: Conviction of a felony may or may not disqualify you for the position under consideration. Under Oklahoma law, conviction of certain crimes is an automatic disqualification for working with children.*

**DRIVING RECORD:** (Complete this section only if applying for a position which will require driving on the job.)

Do you have a valid driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_ State of Issue \_\_\_\_\_ Any restrictions? \_\_\_\_\_

Have you been ticketed for a moving violation within the last 5 years? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what type, when, where? \_\_\_\_\_

**WORK EXPERIENCE:** Please list all relevant experience that qualifies you for the position, beginning with the **most recent** employment.

Name and Mailing Address of Current Employer	Date Employed	Job Title	Supervisor & Phone No.

Description of work performed: \_\_\_\_\_

Beginning Salary: \$ \_\_\_\_\_ Ending salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Hours worked per week: \_\_\_\_\_ Number of employees supervised \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact your current employer? Yes \_\_\_\_\_ No \_\_\_\_\_ (Verification of your current employment will be required prior to a job offer.)

Name and Mailing Address of Previous Employer	Dates Employed	Job Title	Supervisor & Phone No.

Description of work performed: \_\_\_\_\_

Beginning Salary: \$ \_\_\_\_\_ Ending salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Hours worked per week: \_\_\_\_\_ Number of employees supervised \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Name and Mailing Address of Previous Employer	Dates Employed	Job Title	Supervisor & Phone No.

Description of work performed: \_\_\_\_\_

Beginning Salary: \$ \_\_\_\_\_ Ending salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Hours worked per week: \_\_\_\_\_ Number of employees supervised \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Name and Mailing Address of Previous Employer	Dates Employed	Job Title	Supervisor & Phone No.

Description of work performed: \_\_\_\_\_

Beginning Salary: \$ \_\_\_\_\_ Ending salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Hours worked per week: \_\_\_\_\_ Number of employees supervised \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Name and Mailing Address of Previous Employer	Dates Employed	Job Title	Supervisor & Phone No.

Description of work performed: \_\_\_\_\_

Beginning Salary: \$ \_\_\_\_\_ Ending salary: \$ \_\_\_\_\_ per \_\_\_\_\_ Hours worked per week: \_\_\_\_\_ Number of employees supervised \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**OTHER INFORMATION:**

Do you consider yourself to be computer literate? Yes \_\_\_\_\_ No \_\_\_\_\_ List software programs with which you are proficient. \_\_\_\_\_

With what other types of business equipment or tools are you experienced and competent? \_\_\_\_\_

What experience do you have working with emotionally disturbed children and youth? \_\_\_\_\_

Are you willing to work shifts and weekends? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain. \_\_\_\_\_

What experience do you have working with persons from cultural and ethnic minorities? \_\_\_\_\_

Why are you interested in working for White Fields? \_\_\_\_\_

How do you feel you can benefit White Fields? \_\_\_\_\_

In the space below, please provide any additional information you believe will be helpful to us in assessing your qualifications for the position under consideration. The back of this page may be used, if necessary.

**APPLICANT'S CERTIFICATION:**

**PLEASE READ THE FOLLOWING CERTIFICATION CAREFULLY BEFORE SIGNING**

I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient reason for denial of employment or discharge. I authorize the use of any information in this application to verify my statements, and, except as indicated above, I authorize the past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous education or employment record. I release all such persons from any liability or damages on account of having furnished such information. I consent to such investigations as White Fields, Inc. may make regarding driving records, law enforcement records, credit reports and my general background. I further understand that all applicable portions of this application must be completed or I will be ineligible for consideration for the position for which I am applying.

I understand that nothing contained in this employment application or in the granting of an interview or of a position of employment is intended to create an employment contract between White Fields, Inc. and myself for either employment or for the providing of any benefits. No promises regarding employment have been made to me, and I understand that no promise or guarantee of employment for any specific length of time or under any specified circumstances shall be binding upon White Fields, Inc. unless made in writing by or with the express written consent and authorization of the Executive Director. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and for any reason and that White Fields, Inc. retains the same right.

I have read a copy of the job description and certify that I am able to perform the essential functions of the position with or without reasonable accommodation. I understand that, depending on the position applied for, prior to being offered employment with White Fields, Inc. I may be requested to take an examination pertaining to skills or equipment operation. In the event I have a disability which will affect my ability to take the test, I will so inform White Fields, Inc. prior to the administration of the test so that a reasonable accommodation can be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. White Fields, Inc. reserves the right to require medical documentation concerning the need for the accommodation.

I understand that, if I am initially offered a position of employment, White Fields, Inc. may require me to pass a medical exam prior to the commencement of work and as a condition of employment. I also understand that drug and/or alcohol tests are a condition of employment and that refusal to submit to such tests when asked by White Fields, Inc. shall be considered sufficient reason for denial of employment or discharge.

I understand that if employed, the policies and rules which are issued by White Fields, Inc. are not conditions of employment and that White Fields, Inc. may revise policies or procedures, in whole or in part, unilaterally at any time.

**IMPORTANT: IF YOU DO NOT UNDERSTAND, IF YOU DISAGREE WITH ANY PORTION OF THE ABOVE CERTIFICATION, OR IF YOU HAVE NOT READ THE JOB DESCRIPTION, PLEASE DO NOT SIGN BEFORE DISCUSSING WITH AN AUTHORIZED REPRESENTATIVE OF WHITE FIELDS.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_