



# CONNECT & INSPIRE CARE

Dedicated Care & Support, Every Step, Every Day

## Application for Employment

Community Partners for Change is an equal opportunity employer. Discrimination of the basis of age, sex, race, color, marital status, physical or mental disability, religious creed, national origin, sexual orientation or any other non-merit factor is strictly prohibited.

Last Name	First Name	
Address	City	State/Zip
Phone Number(s)	Email address	

Employment desired:  Regular  Part-Time  Temporary

Position applying for: \_\_\_\_\_

Date you can start: \_\_\_\_\_

Are you employed now?  May we contact your employer? \_\_\_\_\_

Have you ever filed an application with us before?  If yes, give date: \_\_\_\_\_

**Note:** If you are hired you will be required to produce proof of your identity and authorization to work in the U.S. before you commence work with us.

Have you ever been convicted of a crime (including misdemeanors, felonies, and arrest(s) which has not been annulled or expunged or sealed by a court?  Yes  No If yes, describe conditions: *Conviction will not necessarily mean immediate disqualification for employment* \_\_\_\_\_

### Education

School	Name & Location	# of years	Did you graduate?	Degree
High school				
College/ Graduate school				
Vocational/ Business/other				

Please list any licenses or special certifications that you hold \_\_\_\_\_

Information technology experience: Please list desktop applications/programs you are familiar with (i.e. word processing, spreadsheets, etc.) \_\_\_\_\_

## Employment Experience

Have you worked for any other Human Service Agency?  Yes  No If yes, please describe

Present or most recent position	Second most recent position	Third most recent position
Company:		
Address:		
Type of Business:		
Duration of employment From: ___/___ to ___/___		
Position Title:		
Responsibilities:		
Supervisor name:		
Reason for changing positions:		

## References

Name:	Phone #:
Name:	Phone #:
Name:	Phone #:

It is my understanding that this employment application, or the granting of an oral interview, does not represent a contract of employment or promise of future benefits by this Agency. I understand and agree that if hired, my employment will be at-will and may be terminated, with or without cause, at any time, by either my employer or myself. I also understand that this written statement supersedes any oral representations made by representatives of Community Partners for Change.

## Certification and Agreement

I certify that the information on this application is true, complete and correct. As an applicant for a position with Community Partners for Change, I authorize Connect & Inspire Care LLC to investigate my past or present employment, character, attendance of last year worked, education, military and police records to ascertain any and all information which may be pertinent to my employment qualifications and experience. I authorize present and former employers, and individuals I have listed as professional/personal references, to furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information. I understand that false answers, statements, or significant omissions made by me on this form shall be sufficient cause for denial of employment or discharge. This authorization shall be valid for one year from the date of my signature below.

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Applicant Signature

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Date