



APPLICATION FOR EMPLOYMENT

Our House, Inc.
76 Floral Avenue
Murray Hill, NJ 07974
908-464-8008

ENTIRE APPLICATION MUST BE COMPLETED. INFORMATION PROVIDED ON THIS APPLICATION MUST BE TRUE AND COMPLETE. ANY FALSE STATEMENT OR FALSIFICATION OF INFORMATION MAY BE CAUSE FOR IMMEDIATE TERMINATION. (SEE STATEMENT ON FINAL PAGE.)

Date: _____

Name: _____ Last 4 digits of SSN: XXX-XX-_____

Address: _____ Phone: _____

_____ E-Mail: _____

Are you over the age of 18? _____ Position(s) applying for: _____

Are you legally eligible for employment in the U.S.A.? Yes _____ No _____ If yes, verification will be required.

Do you have a valid driver's license? _____ If yes, list the number: _____ State _____

(Please note that MVRs are checked prior to hire.)

Were you previously employed by Our House, Inc.? _____ If yes, list dates: _____

How were you referred to our agency? _____

If referred by an Our House, Inc. employee, list name of employee: _____

If you are considered for employment, on what date will you be available for work? _____

Have you ever been adjudged civilly or criminally liable for abuse of a person with a developmental disability? YES NO

Have you ever been adjudged civilly or criminally liable for abuse of any person? _____

[Conviction of a crime will not be an absolute bar to employment.] _____

Have you ever been convicted of a crime? _____ If so, provide the details. _____

[Conviction of a crime will not be an absolute bar to employment.] _____

Are there any other experiences, skills or qualifications which will be of special benefit in the job for which you are applying? (Applicant should not list any information that Federal and/or State law precludes in the the pre-employment stage.)

A written job description will be provided if you are interviewed. After reading the job description(s), are you able to perform each of the essential job functions of the position(s) for which you have applied? _____ (Answer only after reading the written Our House, Inc. job description.) If no, list the function(s) that you are unable to perform. _____

Did you serve in an Americorps, Peace Corps or another national service program? Yes _____ NO _____.

Please name the AmeriCorps program or Peace Corps country where you served. _____

Is there any information we would need about your name or use of another name for us to be able to check your work record?

Yes _____ No _____ If yes, please list name: _____

EMPLOYMENT RECORD

INSTRUCTONS:

Entire employment record must be listed. Dates of employment must be accurate. Use additional sheet if necessary.

<u>Company Name & Address</u>	<u>Date Started/Left</u>	<u>Reason for Leaving</u>	<u>Name of Supervisor</u>
Job Title & Responsibilities:			
Phone #:			
Fax #:			

<u>Company Name & Address</u>	<u>Date Started/Left</u>	<u>Reason for Leaving</u>	<u>Name of Supervisor</u>
Job Title & Responsibilities:			
Phone #:			
Fax #:			

<u>Company Name & Address</u>	<u>Date Started/Left</u>	<u>Reason for Leaving</u>	<u>Name of Supervisor</u>
Job Title & Responsibilities:			
Phone #:			
Fax #:			

EDUCATION

<u>Name & Address of School</u>	<u>Course of Study</u>	<u>Years Completed</u>	<u>Degree/Diploma</u>
High School:			
College:			
Other (Specify):			

REFERENCES

LIST THREE SUPERVISORS FROM CURRENT AND PAST JOBS.

Do not list relatives or co-workers. If applicable, you may also list supervisors from educational or volunteer experiences.

Name	Job Title	Years Known
Company name and street address		Phone #
City, State, and Zip code		Fax #

Name	Job Title	Years Known
Company name and street address		Phone #
City, State, and Zip code		Fax #

Name	Job Title	Years Known
Company name and street address		Phone #
City, State, and Zip code		Fax #



Dear Applicant,

- 1) On the next page (the Reference Request for Employment), please complete ONLY the following (the Recruiter will complete the rest):
 - (a) Read the Applicant Release (found at the bottom of the page)
 - (b) Sign and Date the form
- 2) Return this piece of paper with the completed application.
- 3) Your application will not be considered if the above instructions are not followed.

Thank you,
The Recruiter



Return: OUR HOUSE, INC. 76 Floral Ave, Murray Hill, NJ 07974 (908) 464 8008 Fax: (908) 464 8263

REFERENCE REQUEST for EMPLOYMENT

ISSUED TO: _____

Applicant: _____ Date: _____

Position applied for: _____

Our House, Inc. is a non-profit agency serving people with developmental disabilities in residential and work settings. This applicant has named you as a reference. Your immediate response to this request is greatly appreciated. Please fax your response to the number listed above. If unable to fax, please call Human Resources or return by mail. This information will be kept confidential. Thank you!

Dates of employment: From _____ to _____. Positions held: _____

Job Duties: _____

Reason for leaving: Resignation _____ Laid off _____ Termination _____ Other _____

Eligible for rehire? Yes _____ No _____

Would you recommend this applicant for work in human services? Yes _____ No _____

Please rate below:

Table with 6 columns: Quality of Work, Initiative, Judgment, Productivity, Work Attendance and Punctuality, Ability to Supervise. Each row has five rating options: Excellent, Very good, Good, Fair, Poor.

Major Strengths and Weaknesses: _____

Additional comments: _____

Completed by: _____ Title: _____

Company name and address (if different from above): _____

Applicant Release: I have applied for employment at Our House, Inc. I authorize Our House, Inc. to obtain and verify information regarding my employment history, educational background, criminal background check, character reference and driver history. I authorize all persons contacted by Our House, Inc. for such references to answer questions relating to my employment history, qualifications, driver history, character reference, reasons for terminating employment and other relevant questions. I release you to answer these questions truthfully and I intend to release any claim I could have against you for breach of privacy rights or defamation. I am aware that Our House, Inc. serves people with developmental disabilities and I acknowledge the obligation of Our House, Inc. to conduct a thorough, candid check of my background because of the vulnerable nature of the people they serve.

Signature of Applicant: _____

Date: _____



OUR HOUSE, INC. FAMILY and OTHER SIGNIFICANT RELATIONSHIP DISCLOSURE

To avoid conflicts of interest, family members or employees in significant relationships with one another are not permitted to work in the same residential location or department. Employees are required to disclose family and other significant relationships at Our House, Inc.

PLEASE READ CAREFULLY:

A Family or Other Significant Relationship is defined as one of the following:

- Relationships by blood – parent, child, grandparent, grandchild, brother, sister, uncle, aunt, nephew, niece, first cousin;
- Relationship by marriage or civil union – step-parent, step-child, brother-in-law, sister-in-law, father-in-law, mother-in-law, son-in-law, daughter-in-law, half-brother, half-sister, uncle, aunt, nephew niece, spouse/partner of any of the above;
- Cohabiting couples;
- Significant others; or
- Any other relationship which may cause a conflict of interest.

******Employees are not permitted to work on shift with or in the line of supervision of other employees who are family or with whom they have significant relationships as defined above.******

******This applies to employees and individuals served (participants and residents).******

PLEASE CHECK ONE of the FOLLOWING:

I have no relationships at Our House, Inc., as defined above, to disclose.

I am disclosing that I have a relationship(s), as defined above, with the following Our House, Inc. employee(s):
(Please use the back of this form, if needed.)

NAME OF EMPLOYEE / INDIVIDUAL SERVED	RELATIONSHIP TO EMPLOYEE / INDIVIDUAL SERVED

The information provided above is true. I understand that I am required to disclose any present and/or future relationships. I further understand that failure to disclose any relationships may lead to disciplinary action.

 Employee Signature

 Date

 Employee Name Printed