



Bethany Children's Home

1863 Bethany Road
Womelsdorf, PA 19567-9214
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Fax: (610) 589-6886
employment@bethanyhome.org
www.bethanyhome.org

APPLICATION FOR EMPLOYMENT

Applicants are considered for employment without regard to race, color, familial status, religion, ancestry, gender, national origin, age, genetic information, veteran status, disability, gender identity, gender expression, sexual orientation or any other classification protected by law.

Date of Application: _____

Desired Position: _____

Desired Salary: _____

Name: _____
LAST FIRST MIDDLE

Address: _____
STREET CITY STATE ZIP CODE

Phone: _____ Email: _____

Do you have a minimum of a high school degree or equivalent? Yes No

Are you at least 21 years of age? Yes No

Are you legally eligible to work in the U.S. and able to provide documentation accordingly? Yes No

Are you able to perform the essential functions of the job for which you are applying with or without a reasonable accommodation? Yes No

How did you hear about this position? _____

Please state why you would like to work for Bethany Children's Home: _____

List any information which demonstrates your qualifications for the position desired (e.g. experience dealing with children, special training, certifications): _____

EDUCATION

Name of School	Location	Course of Study	Degree Rec'd
High School			
College/Univ.			
Other			

EMPLOYMENT EXPERIENCE

List your employment history, beginning with your most recent employer.
Please complete all requested information, even if supplying a resume.

Company: _____ Job Title: _____
Employment Date: From _____ to _____
Type of Business: _____ Supervisor's Name: _____
Address: _____ Supervisor's Title: _____
Phone Number: _____ May we contact? Yes No
Starting Salary: _____ per _____ Ending Salary: _____ per _____
Duties/ Responsibilities: _____

Reason for Leaving: _____

Company: _____ Job Title: _____
Employment Date: From _____ to _____
Type of Business: _____ Supervisor's Name: _____
Address: _____ Supervisor's Title: _____
Phone Number: _____ May we contact? Yes No
Starting Salary: _____ per _____ Ending Salary: _____ per _____
Duties/ Responsibilities: _____

Reason for Leaving: _____

Company: _____ Job Title: _____
Employment Date: From _____ to _____
Type of Business: _____ Supervisor's Name: _____
Address: _____ Supervisor's Title: _____
Phone Number: _____ May we contact? Yes No
Starting Salary: _____ per _____ Ending Salary: _____ per _____
Duties/ Responsibilities: _____

Reason for Leaving: _____

REFERENCES

Please list three people who can speak of your character and work ability who are not related to you and are not previous employers:

Name	Relationship	Address	Phone Number
1.			
2.			
3.			

AVAILABILITY

What shifts and days can you work?

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Weekends</u>
<input type="checkbox"/> 1 st shift	<input type="checkbox"/> 1 st shift	<input type="checkbox"/> 1 st shift	<input type="checkbox"/> 1 st shift	<input type="checkbox"/> 1 st shift	<input type="checkbox"/> 1 st shift
<input type="checkbox"/> 2 nd shift	<input type="checkbox"/> 2 nd shift	<input type="checkbox"/> 2 nd shift	<input type="checkbox"/> 2 nd shift	<input type="checkbox"/> 2 nd shift	<input type="checkbox"/> 2 nd shift
<input type="checkbox"/> 3 rd shift	<input type="checkbox"/> 3 rd shift	<input type="checkbox"/> 3 rd shift	<input type="checkbox"/> 3 rd shift	<input type="checkbox"/> 3 rd shift	<input type="checkbox"/> 3 rd shift

A reasonable effort is made to accommodate the religious needs of employees.

Are there any specific times that you cannot work? Yes No

If yes, please explain: _____

Do you have responsibilities other than work that could interfere with specific job requirements, such as attending mandatory training that may occur on shifts other than what you would normally be scheduled to work? Yes No

If yes, please explain: _____

Do you have a reliable method of getting to work: Yes No

If hired, on what date would you be able to start? _____

NOTICE AND ACKNOWLEDGEMENT

By signing below, I affirm that all of the information that I have supplied on this employment application is complete, true and correct to the best of my knowledge. I understand and agree that any falsification, misrepresentation or omission of fact shall be grounds for the immediate rejection of my application or, if hired, my immediate termination of employment regardless of the time elapsed before discovery.

I understand and agree that nothing in this application is intended to imply or create an employment relationship or contract for employment. If hired, my employment will be "at-will" and can be terminated by either party at any time, with or without notice, for any reason or for no reason whatsoever.

I understand and agree that Bethany Children's Home ("Bethany") may investigate all statements made in this application and may discuss the results of its investigation with those responsible for hiring. Bethany may contact my references and former employers and I authorize each individual contacted to provide truthful information regarding my qualifications and previous work. In addition, I hereby release Bethany, my former employers, and all other persons or entities contacted by Bethany from any and all claims, demands, or liabilities arising out of or in any way related to the release, disclosure, and use of such information.

I acknowledge that any employment with Bethany is contingent upon my passing a criminal background check, physical examination, and/or drug screening test. I understand and agree that if I am offered full time employment with Bethany, such offer will be contingent upon me passing a background check, including but not limited to a Pennsylvania Child Abuse History Clearance, a State Police Criminal History Clearance and FBI Fingerprint Clearance. I understand that Bethany has the right to revoke any offer of employment made to me if I fail a required criminal background check, physical examination or drug screening test. I also understand that if I fail a required drug screening test, I will not be eligible to re-apply for employment with Bethany for six months. The drug screening test will be administered at a time and place specified by Bethany.

I hereby certify that I have not been convicted of any criminal offense that would preclude me from being employed under the Child Protective Services Law, have any "indicated" or "founded" report of child abuse on my record or any other circumstance that would preclude my employment under applicable law. I also certify that I am not an excluded individual or entity in which I am precluded from participating in programs with Federal funding.

Applicant Printed Name

Date

Applicant Signature