

Bethesda House of Schenectady, Inc.

Employment Application

Bethesda House of Schenectady is an Equal Opportunity Employer. Employees are chosen on the basis of ability without regard to race, color, creed, religion, age, sex, national origin, disability, marital status, familial status, ancestry, ethnic group identification, ethnic background, traits historically associated with race, citizenship, military/veteran status, domestic violence victim status, sexual orientation, gender identity/expression, predisposing genetic characteristics/genetic information or carrier status, reproductive health decision making, or any other category protected by applicable federal, state, or local law. No question on this application is asked for the purpose of limiting or excluding any applicant's consideration for employment because of his/her protected status.

In addition, Bethesda House of Schenectady will provide a reasonable accommodation to enable applicants with disabilities to participate in the hiring process and for employees to perform the essential functions of their job, unless doing so would pose an undue hardship to the organization. Please advise us if you need assistance completing this application, participating in the interview and selection process, or performing the essential functions of the job for which you are applying.

Each question must be answered in full. If the answer to a question is "No," or "None," so indicate. Attach a copy of your most current resume.

Name:	
Address:	City/State Zip
	Telephone #
Are you at least 18 years of age? Yes No	Email address:
If no, can you furnish a work permit? Yes No	<u>)</u>
Are you legally eligible for work in the United	<u>States?</u> Yes No
Position Desired:	
Available for <i>(check)</i> Full Time Part	t Time Per Diem Summer Internship
Date Available for Work:	
Are you restricted to any hours that you can work	k? Yes No If yes, please list:

Please type, print or write legibly

Will you work overtime if required? Yes No

If no, please explain:

Were you previously employed by Bethesda House? If so, provide dates and Supervisor name(s):

Have you ever submitted an application for employment to Bethesda House before?Yes	No
If yes, provide date(s) and position(s):	

Do you have a relative who works at Bethesda House? If yes, who?

Where did you learn about Bethesda House?

□ Newspaper (name)

□ Friend/Relative (name)

Employment Agency (name)

□ Other (Explain)

Please indicate any job-related skills or qualifications that may be helpful for this position.

<u>EMPLOYMENT HISTORY (</u>PLEASE COMPLETE <u>ALL</u> INFORMATION REQUESTED. YOU MUST COMPLETE THIS SECTION EVEN IF SUBMITTING A RESUME AS WELL.)

Previous positions held (list last 3 positions, giving most recent position first):

1. Employer Name:

Employer Address:

Name of Supervisor:

Name employed under *(if different)*

Job Title: _____

Dates of Employment (month/year): From: _____ To: _____

Reason for Leaving:

May we request a reference from this former employer <i>(circle)</i> :	Yes	No
If yes, name of person to contact:		
Phone number:		
2. Employer Name:		
Employer Address:		
Name of Supervisor:		
Name employed under (if different)		
Job Title:		
Dates of Employment (month/year): From: To:		
Reason for Leaving:		
May we request a reference from this former employer <i>(circle)</i> :	Yes	No
If yes, name of person to contact:		
Phone number:		
3. Employer Name:		
Employer Address:		
Name of Supervisor:		
Name employed under (if different)		
Job Title:		
Dates of Employment (month/year): From: To:		
Reason for Leaving:		
May we request a reference from this former employer <i>(circle)</i> :	Yes	No
If yes, name of person to contact:		
Phone number:		
Please explain any gaps in employment, if applicable:		

EDUCATIONAL HISTORY

	Name and Address of School	Course of Study	Did you Graduate?	Degree/Diploma (If Received)
High School				
Undergraduate College				
Graduate College				
Other				

List schools attended, address and degree or diploma received:

Do you have a high school equivalency diploma (circle)? Yes No

Professional honors received, works published, or other professional accomplishments. You may exclude any information that would reveal protected status(es):

Membership in organizations you consider relevant to the job which you are applying. You may exclude any information that would reveal protected status(es):

PROFESSIONAL LICENSES

List any licenses, certificates, or other authorizations to practice a trade of profession that you currently hold or have held in the past: Profession or Trade:

Licensing Agency:

Are you currently licensed or reg	gistered in New	York State (circle)? Ye	s No
Number:	Date issued:	Exp	o. Date:
If not, have you applied (check)?	Yes No	Date State Board Taken:	
Home State: _ In what other sta	ate are you licen	sed/registered?	
Other job-related License(s) or C	Certificate(s) for	which you are eligible:	

Any other job-related certifications or licenses you hold:

Have you ever had a license or certificate revoked, or otherwise been subjected to professional discipline? Yes No

REFERENCES:

Please list three **professional** references, not relatives or personal friends. Professional references include current and/or previous employers/supervisors.

Name	Telephone	E-mail address	Occupation	No. of Years Known

APPLICANT STATEMENT

I hereby certify that my answers in this application are true, complete, and correct. I understand that, as part of the application process, I may be asked to provide information of a personal nature with regard to work eligibility, work experiences, etc. I understand that I am providing this information voluntarily and may discontinue the application process at any time. I grant Bethesda House of Schenectady; Inc. permission to investigate and verify any and all information provided by me and release Bethesda

House of Schenectady, Inc. and all persons who respond to its inquiries from any and all liability resulting from such investigation. I understand that I may be discharged or refused employment if any statement in this application is false, inaccurate, or incomplete.

I understand that if I am employed by Bethesda House of Schenectady, Inc., I may be required to work rotating shifts or change my regular shift (if applicable) upon reasonable request at any time when deemed necessary.

I understand that my employment is dependent upon satisfactory references, attendance at employee orientation and satisfactory completion of the probationary period.

I also consent to any and all job related medical examinations required by Bethesda House of Schenectady, Inc. and understand that if I am employed, I will be i n an introductory period for a minimum of ninety (90) days from date of employment. Should I be employed by Bethesda House of Schenectady, Inc., I agree to abide by the policies, procedures and rules of the Personnel Handbook and/or other agreements, policies, and procedures which may be in effect. I ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANYTIME AND FOR ANY OR NO REASON,

EXCEPT AS MAY BE REQUIRED BY LAW. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of Bethesda House is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing language are valid unless in writing and signed by Bethesda House's president.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from Bethesda House and still wish to be considered for employment, I must reapply and complete a new application. I also understand that, if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

Signature:				Date:		
For Human	Resour	ce Depa	rtment Use:			
Application	received	l by:		Date:		
Interview?	Yes	No	Date of Interview:			
Comments:	<u> </u>					

BACKGROUND CHECK DISCLOSURE FORM

Please answer the questions below regarding your criminal history. Answering "yes" to one or more the following questions will not necessarily disqualify you from employment. Factors such as date of offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

1.	Have you ever pled "guilty" or "no contest" to or been convicted of a felony,
misden	neanor, or criminal violation? \Box Yes \Box No

If yes, please provide date(s) and details, including nature of the conviction(s),
location(s)/jurisdiction(s), the year(s) of conviction(s), and any information regarding rehabilitation or
other information you wish us to consider.

In your response, please do not include information regarding any youthful offender adjudication or any conviction for a violation that has been sealed pursuant to New York Criminal Law §§ 160.55 or 160.58.

Do you currently have any criminal charges pending against you or open arrest warrants? 2. \Box Yes \Box No

If yes, please provide date(s) and details, including the nature of the charges/warrants and location(s)/jurisdiction(s):

I certify that the information I have provided on this disclosure form is true, accurate, and complete. I understand that any false statement, misrepresentation, or omission of fact will be cause for refusal of employment or, if employed, termination of employment.

Signature: _____ Date: _____