# horizontal Employment Application

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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name: | | | | |  | | | | | | | | | | | | | | First: | | | |  | | | | | | | | | | | M.I. | | | | Date: | | | | | |  | |
| Street Address: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | | | | | | | |  | |
| City: |  | | | | | | | | | | | | | | | | | | State: | | | |  | | | | | | | | | | | ZIP: | | | | | |  | | | | | |
| Phone: |  | | | | | | | | | | | | | | | | | | E-mail Address: | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Are you a Board Certified Behavior Analyst? | | | | | | | | | | | | | | | | YES | | | | NO | | | | If you are in the process of becoming Board Certified, please explain: | | | | | | | | | | | | | | | | | | | | | |
| Are you a Registered Behavior Technician? | | | | | | | | | | | | | | | | YES | | | | NO | | | | If you are in the process of becoming a RBT, please explain: | | | | | | | | | | | | | | | | | | | | | |
| Are you applying for: | | | | | | | | | FULL TIME | | | | | PART TIME | | | | | | | TEMPORARY/SEASONAL | | | | | | | | | | | | | | Date Available to Start: | | | | | | | | | | |
| If you are applying for temporary/seasonal work, what is the last date you are available to work? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| Are you a citizen of the United States? | | | | | | | | | | | | | | | YES | | NO | | | | | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | | | | | | | | | | YES | | NO |
| Have you ever worked for this company? | | | | | | | | | | | | | | | YES | | NO | | | | | | If so, when? | | | | | |  | | | | | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | | | | | | | YES | | NO | | | | | | If yes, explain | | | | | |  | | | | | | | | | | | | | | | | |
| How did you hear about HOPE Services? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Why are you interested in working for HOPE Services? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tell us about your experience with or interest in children with autism and other developmental disabilities: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| What are your long-term goals? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School | | | | |  | | | | | | | | | | | | Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From | |  | | | | | | To | |  | | Did you graduate? | | | | | YES | | | | | | NO | | | | | Degree | | | | |  | | | | | | | | | | | | |
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| College | |  | | | | | | | | | | | | | | | Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From | |  | | | | | | To | |  | | Did you graduate? | | | | | YES | | | | | | NO | | | | | Degree | | | | |  | | | | | | | | | | | | |
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| Other | |  | | | | | | | | | | | | | | | Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From | |  | | | | | | To | |  | | Did you graduate? | | | | | YES | | | | | | NO | | | | | Degree | | | | |  | | | | | | | | | | | | |
| References | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list one professional/educational and one personal reference. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | |  | | | | | | | | | | | | | | | | | | | | Relationship | | | | | | | |  | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | | | | Phone | | | | | ( ) | | | | | | | | | | | | | | | |
| Address | | | | |  | | | | | | | | | | | | | | | | | | | | E-mail | | | | |  | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | |  | | | | | | | | | | | | | | | | | | | | Relationship | | | | | | | |  | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | | | | Phone | | | | | ( ) | | | | | | | | | | | | | | | |
| Address | | | | |  | | | | | | | | | | | | | | | | | | | | E-mail | | | | |  | | | | | | | | | | | | | | | |
| Previous Employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company | | | |  | | | | | | | | | | | | | | | | | | | | | | Phone | | | | | ( ) | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | |  | | | | | | | | | | | | | |
| Job Title | | |  | | | | | | | | | | | | | | | Starting Salary | | | | | | | | $ | | | | | | | | | | Ending Salary | | | | | | $ | | | |
| Responsibilities | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From |  | | | | | | | To | | |  | | Reason for Leaving | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | YES | | | | NO | | | | |  | | | | | | | | | | | | | | |
| Company | | | |  | | | | | | | | | | | | | | | | | | | | | | Phone | | | | | ( ) | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | |  | | | | | | | | | | | | | |
| Job Title | | |  | | | | | | | | | | | | | | | Starting Salary | | | | | | | | $ | | | | | | | | | | Ending Salary | | | | | | $ | | | |
| Responsibilities | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From |  | | | | | | | To | | |  | | Reason for Leaving | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | YES | | | | NO | | | | |  | | | | | | | | | | | | | | |
| Company | | |  | | | | | | | | | | | | | | | | | | | | | | | Phone | | | | | ( ) | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | |  | | | | | | | | | | | | | |
| Job Title | | |  | | | | | | | | | | | | | | | Starting Salary | | | | | | | | $ | | | | | | | | | | Ending Salary | | | | | | $ | | | |
| Responsibilities | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From |  | | | | | | | To | | |  | | Reason for Leaving | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | YES | | | | NO | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Disclaimer and Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview  may result in my release. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | | |  | | | | |