

Application for Employment with Door of Opportunity, Inc.

We are an equal opportunity employer and do not lawfully discriminate in employment. No question on this application is used for the purpose for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name: _____ Date: _____

Position(s) applied for or type of work desired:

Address: _____

Telephone #: _____ Social Security #: _____

Driver's License #: _____ State: _____

Door of Opportunity, Inc. provides services to individuals with developmental disabilities 24 hours a day 7 days a week.

Type of employment desired: **(circle one)** Full-Time Part-Time Temporary Volunteer

Date you will be available to start work: _____

Are you able to meet the attendance requirements? Yes No

Can you perform the essential functions of the job without accommodations?
 Yes No If No, what kind of accommodations would be necessary?

Do you have any objection to working overtime if necessary? Yes No

Can you travel if required by this position? Yes No

Have you been previously employed by our organization? Yes No

Can you submit proof of legal employment authorization and identity? Yes No

If you are under 18, can you furnish a work permit if required? Yes No

Have you been convicted of a crime in the last 7 years? Yes No

If yes, please explain (a conviction will not automatically bar employment):

How were you referred to us? _____

Employment History

Please provide all employment information for you're past three employers starting with the most recent.

Employer: _____	Position held: _____
Address: _____	Telephone #: _____
Immediate supervisor and title: _____	
Date employed: From _____ to _____ Salary: _____	
Job Summary: _____ _____ _____	
Reason for leaving: _____	

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Date employed: From _____ to _____ Salary: _____	
Job Summary: _____ _____ _____	
Reason for leaving: _____	

Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

Educational History

List school name and location, years completed, course of study and any degrees earned:

School(s), Colleges or Universities, Training, Technical	Address	Location	Years Completed	Degree, Diploma, Certificate

References

List 3 references names, telephone numbers, and years known (do not include relatives or employers):

Name	Relation	Years Known	Address	Phone #

I hereby authorize the potential employer contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representative's for seeking, gathering, and using such information to make employment decisions and all other persons or organization for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time. So long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to give satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

APPLICANT SIGNATURE: _____ **DATE:** _____

Two or More Races (Not Hispanic or Latino) – All persons who identify with more than one of the above five races.

VETERAN STATUS:

(Please check one if it describes your veteran status.*)

 SPECIAL DISABLED VETERAN: Means (A) a veteran who is entitled to compensation (or who, but for the receipt of military retired pay, would be entitled to compensation) under laws administered by the Department of Veteran Affairs for a disability rated at 10 or 20 percent in the case of a veteran who has been determined to have a serious employment disability or (B) a person who was discharged or released from active duty because of a service-connected disability.

 VIETNAM ERA VETERAN: A Vietnam Era veteran is a person who (1) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964, and May 7, 1975, and was discharged or released with other than a dishonorable discharge; (2) was discharged or released from active duty for a service connected disability if any part of such active duty was performed between August 5, 1964, and May 7, 1975; or (3) served on active duty for more than 180 days and served in the Republic of Vietnam between February 28, 1961, and May 7, 1975.

 OTHER ELIGIBLE VETERAN: Any veteran who served in a “war” declared by Congress, in a campaign or on an expedition for which a campaign badge, a service medal, or an expeditionary medal has been awarded.

* Veteran status may only be requested after a job offer is made.

Please identify where you learned about an employment opportunity with this organization.

- Unsolicited
- Advertisement
- Employee Referral
- Internal Posting
- Other

I do not wish to Self-Identify:

Signature

Personal and Confidential

This page contains sensitive information, store in secure "Affirmative Action Forms" files, separately from personnel records!

Office Use Only: *A* *I* *O* *H*