# EMPLOYMENT APPLICATION

Name: _____

Last First Middle

Present address: _____

City: _____ State: _____ Zip: _____

List previous address if less than five years (use other side to list addresses)

Home phone: _____Cell Number _____E-mail Address _____

What social networks are you currently using (list all) _____

_____

Position applying for: _____

Date you are available to start: _____ Are you over the age of 18? ☐ Yes ☐ No

**Qualifications:**

Academic achievements: (schools attended, degrees earned, dates of completion)

| School and Location | Degree Received | Dates |
|---|---|---|
| | | |
| | | |
| | | |

Continuing education completed: (courses taken, dates of completion)

| Courses Taken | Dates completed | CEU's Received |
|---|---|---|
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Professional organizations: (list any in which you have membership and dates of involvement).

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First aid training? Yes ☐ No ☐ Date completed _____

CPR training? Yes ☐ No ☐ Date completed _____

AED training? Yes ☐ No ☐ Date completed _____

Other Trainings or Certifications _____

Previous Work Experience: Please list your previous employers from the past five years. Include the job title, a description of position duties and responsibilities, the name of the company/employer, the address of company/employer, the name of your immediate supervisor, and the dates you were employed in each position.

| Employer | Position | Duties | Dates of Employment | Supervisor | Phone Numbers |
|---|---|---|---|---|---|
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Previous Volunteer Experience: Please list any relevant volunteer positions you have held and list the duties you performed in each position, the name of your supervisor, the address and phone number of the volunteer organization, and the dates of your volunteer service.

| Organization | Position | Duties | Dates Involved | Supervisor | Phone Numbers |
|---|---|---|---|---|---|
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Ever convicted of a criminal offense (Felony or Misdemeanor)? Yes ☐ No ☐

Ever charged with a sexual offense related to children? Yes ☐ No ☐

Ever charged with a crime of violence? Yes ☐ No ☐

Ever had to report to any organization/registry for abuse or misconduct involving children? Yes ☐ No ☐

Any other disciplinary action or investigation pending by an employer or other organization for violence, sexual misconduct, or misconduct with children? Yes ☐ No ☐

Ever been disciplined or dismissed from any volunteer or employment position for any reason or following an allegation of sexual misconduct? Yes ☐ No ☐

Have you been reprimanded or asked to leave or end involvement with any program providing services to children? Yes ☐ No ☐

Do you now or have you ever sought out or intentionally viewed child pornography? Yes ☐ No ☐

**References:** Please list three individuals who are not immediate family members or in the same residence. Please list people who have known you for at least three years.

1. Name: _____

   Address: _____

   City: _____ State: _____ Zip Code: _____

   Phone: _____Email: _____

   Length of time you have known reference: _____Relationship to reference: _____

2. Name: _____

   Address: _____

   City: _____ State: _____ Zip Code: _____

   Phone: _____Email: _____

   Length of time you have known reference: _____Relationship to reference: _____

3. Name: _____

   Address: _____

   City: _____ State: _____ Zip Code: _____

   Phone: _____Email: _____

   Length of time you have known reference: _____Relationship to reference: _____

**Waiver and Consent:**

I, _____, hereby certify that the information I have provided on this application is true and correct. I authorize the Susquehanna Conference to verify the information I have provided on this application by contacting the references and employers I have listed, by conducting a criminal records check, or by other means, including contacting others whom I have not listed. I authorize the references and employers listed in this application to give you whatever information they may have regarding my character and fitness for the job for which I have applied.

I have read this waiver and the entire application, and I am fully aware of its contents. I sign this consent freely and under no duress or coercion.

_____

Signature of Applicant Date

_____

Witness Date