

# REDWOOD COMMUNITY ACTION AGENCY EMPLOYMENT APPLICATION

Accept Appl.	Reject Appl. Late/Incompl.	Intrv.
Intrv.	References	Offer
Reject	Checked	Job

		Reject	Checked	
Position (s) Applied For:				
			•	
rvice, se. ally prot	xual ori ected st	ientation/preference, tatus. Redwood Com	disability munity	
• •				
FIRS	ST		MIDDLE	
CIT	Y	STATE	ZIP	
(	)			
	ALT	TERNATE		
r school	records	may be filed.		
Y	N	DATE(S):		
Y	N	DATE(S):		
Y	N			
Y	N			
Y	N			
Y	N	HOURS:		
Y	N			
Y	N			
Y	N			
	rvice, seally protyer (E.O. urately, chinder your school of the school o	FIRST  CITY  ( )  ALT  Trischool records  Y N  Y N  Y N  Y N  Y N  Y N  Y N  Y	scrimination based on race, color, revice, sexual orientation/preference, ally protected status. Redwood Comper (E.O.E.) and an "At Will Employarately, completely, and in blue or black hinder your chances for employment of the status of the	

If hired, can you furnish proof of identity and employment eligibility in accordance with Federal Law and regulations of Immigration Services? Y N

#### **EMPLOYMENT HISTORY**

Please give an accurate, complete, employment history starting with your most recent employer. You may include Volunteer Work and/or Internships if relevant to the position. Please account for all periods of unemployment. If more space is needed, a separate sheet may be attached.

#### You Must Complete This Section Even If Attaching a Resume

Company Name	Telephone	
Address	Employed (State month and year) From: To:	
Name of Supervisor	Hours per Pay rate: Week:	
State Job Title and Describe Job Duties:	Reason for Leaving:	
Company Name	Telephone	
Address	Employed (State month and year) From: To:	
Name of Supervisor	Hours per Pay rate: Week:	
State Job Title and Describe Job Duties:	Reason for Leaving:	
Company Name	Telephone	
Address	Employed (State month and year) From: To:	
Name of Supervisor	Hours per Pay Rate: Week:	
State Job Title and Describe Job Duties:	Reason for Leaving:	
Company Name	I. Talanhana	
	Telephone	
Address	Employed (State month and year) From: To:	
Name of Supervisor	Hours per Pay Rate: Week:	
State Job Title and Describe Job Duties:	Reason for Leaving:	

### **ADDITIONAL REFERENCES**

(Persons not related to you, who have knowledge of your work performance or your professional services). Do not list employer/supervisors previously listed in the Employment History section.

1. Name:		Phor	ne:		
Address:		_			
Association:		Yrs.	Yrs. Known:		
2. Name:		Phoi	ne:		
Address:					
Association:		Yrs. Known:			
3. Name:		Phone:			
Association:		Yrs.	Known:		
EDUCATION A	AND TRAININ	G (Voluntary-depending	on position applied for)		
	High School	College/University	Graduate/Professional		
School Name					
Years Completed					
Diploma/Degree					
Course of Study					
Other Vocational, B	Business, or Special Ski	ills/Training:			
	ny languages, <i>other th</i>	nan English, that you speak,	read/write or		
understand. LEVEL	FLUENT	GOOD	FAIR		
SPEAK:					
READ/WRITE:					
UNDERSTAND:	I	I			

## APPLICANTS STATEMENT IMPORTANT – PLEASE READ, INITIAL AND SIGN

This application for employment will <u>only</u> by considered for the position(s) listed. Any applicant wishing to be considered for further employment must submit a new application for the position desired. Applications are <u>not</u> held for consideration of future available positions.

The applicant understands that neither this document, nor any offer of employment from the employer, constitutes

Initials

	an employment contract unless the employer and employee in writing execute a specific document to that effect.
Initials	At-Will Employment – I acknowledge that if hired, I will be an <u>at-will employee</u> . As an <u>at-will employee</u> I may be subject to dismissal at any time, with or without cause or justification, at the discretion of the employer. I understand that no representative of the company, other than the Executive Director independently and/or the Board of Directors has the authority to change the terms of an at-will employment and that any such change can occur only in a written employment contract.
Initials	Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?  YES  NO
	Individuals who declare, through this form, that they have been arrested, charged with or convicted of any offenses listed below are not automatically disqualified from being hired. Redwood Community Action Agency must review each case to assess the relevance of the arrest, charge or conviction in a hiring decision.
	All prospective employees are required to provide information regarding the following:  1. All pending and prior criminal arrests and charges related to child sexual abuse and their disposition;  2. Convictions related to other forms of child abuse and/or neglect; and  3. All convictions of violent felonies.
	No, <u>I have not</u> been arrested, charged and/or convicted on one or more of the three types of offenses listed above.
	Yes, <u>I have been</u> arrested, charged and/or convicted on one or more of the three types of offenses listed above.
	If yes, please attach information listing the offense(s), the date(s) of the arrest, charge, and/or conviction, and other relevant information.
	Have you ever been convicted of a felony, including driving under the influence of intoxicants, for which the date of conviction or prison release, whichever date is more recent, is within seven (7) years of the date of this application?  Yes ( ) No ( )  If yes, please give us date, nature of offense(s) and where convicted:
reference achievem direct all to release the contra education individual because of I declare misleading grounds funderstoo prior noti	the any representative of RCAA to thoroughly investigate my background, including, but not limited to, my so, educational record and work history. This information includes, but is not limited to, my work tents, performance, attendance, disciplinary history, salary record and personal history. <b>I authorize</b> and of my former schools, employers, and any other individuals that possess information about my background, as such information about me upon request by a representative of RCAA, regardless of any prior direction to any that I may have given. I also authorize disclosure to RCAA of all transcripts, reports, letters and other in or work records, without prior notice to me. I release all schools, past and present employers, and all other ils and entities from any and all liability for damage of whatever kind which may at any time result to me of compliance with this authorization and request to release information. that all statements and answers in this application are true and complete and agree that any untruth, aganswer, omission, concealment or failure to answer any question fully, completely and accurately will be for terminating my employment. I agree that if employment is offered to and accepted by me, it is mutually od and agreed that any employment is not confined to a fixed term and may be ended by either party without ce, unless otherwise affected by written company policies.
PRINTED	NAME: DATE:
CICNATI	DE OE ADDI ICANT.