

APPLICATION FOR EMPLOYMENT



COLE COUNTY RESIDENTIAL SERVICES, INC.

1908 Boggs Creek Road · Jefferson City, Missouri 65101-5580 (573) 634-4555 Voice/TDD (573) 634-4352 FAX

(Hereinafter known as CCRSI)

Date: _____ **E-Mail Address:** _____

GENERAL INFORMATION

Name:		Social Security # (Attach copy of card): _____ - _____ - _____	
Phone Number:	Home:	Cell:	Other:
Present Address:		No. of years at this address:	
City, State, Zip:			
Former Address:		No. of years at this address:	
City, State, Zip:			
Referred By:			

EMPLOYMENT DESIRED

NOTE: ALL SUPPORT STAFF POSITIONS REQUIRE REGULAR WEEKEND WORK.

Position:	Full time ___ Part Time ___ PRN ___
Date you are available for employment:	Shift: Day ___ Evening ___ Night ___
Have you ever applied to CCRSI before?	When?
What skills or qualifications (including volunteer and student experience) do you feel would help you in employment with CCRSI?	
Please name any relatives or friends:	
a) employed by CCRSI	
b) serving on the board of directors	
c) receiving services from CCRSI	

LEGAL

Have you ever been convicted of any criminal offenses, including misdemeanors or felonies?
If yes, describe in full:

EDUCATION

**If hired, proof of High School / GED Diploma will be required.*

* Name and Address	Years Attended		Circle Last Year Completed	Graduate?	Diploma or Degree
	From	To			
High School			9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED	
College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other, specify			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

DRIVING INFORMATION (All CCRSI positions require driving.)

Driver's license held at present: (Attach copy of license)
 Expires: _____ State _____ Number _____ Type _____
 Are you capable of obtaining a Class E Missouri Driver License or a Class A, B, or C with a passenger vehicles endorsement? Yes _____ No _____
 Have you ever been convicted of any traffic violations? If yes, please explain. _____

 Have you ever been denied a license, permit, or privilege to operate a motor vehicle? Yes _____ No _____
 Has any license, permit, or privilege ever been suspended or revoked? Yes _____ No _____
 If either answer is yes, please explain: _____

FORMER EMPLOYERS

List below all present and past employment, beginning with your most recent. (May substitute with a resume', if resume' contains all information requested below.) ATTACH EXTRA SHEETS AS NECESSARY.

Company	Type of Business
Address: City/State/ZIP:	Phone:
From: Month _____ Year _____	To: Month _____ Year _____
Supervisor	Reason for Leaving
Describe your duties	
Company	Type of Business
Address: City/State/ZIP:	Phone:
From: Month _____ Year _____	To: Month _____ Year _____
Supervisor	Reason for Leaving
Describe your duties	
Company	Type of Business
Address: City/State/ZIP:	Phone:
From: Month _____ Year _____	To: Month _____ Year _____
Supervisor	Reason for Leaving
Describe your duties	

REFERENCES

Give the names, addresses, and phone numbers of three persons not related to you, whom you have known at least one year: *These references will be verified.*

Name	Address	Phone Number
1.		
2.		
3.		



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CCRSI respects individual choice by providing quality supports and services to people who have developmental disabilities.

I give my consent that any former employer, upon request, may give full information relative to my employment with them, including the reason for my leaving their employment.

Date _____ Signature _____

If employed, I authorize CCRSI to provide information, on request to creditors (verification of income and dates of employment) and to any future employers regarding my work performance while employed by CCRSI.

Date _____ Signature _____

I authorize investigation of all statements contained in this application. I understand that deliberate misrepresentation is cause for dismissal or further consideration as a prospective employee.

Date _____ Signature _____

--PHOTOCOPIES OF THESE AUTHORIZATIONS WILL BE CONSIDERED VALID--

CCRSI shall not fail to hire, discharge or discriminate among applicants for employment or employees in terms of compensation, terms, conditions and privileges of employment because of race, color, religion, national origin, sex, disability, for disabled and Vietnam-era veterans, for persons over 40 years of age. Reasonable accommodation shall be made for persons with disabilities who are applicants or employees capable of performing the essential functions of their positions. CCRSI shall not limit, segregate or classify applicants and employees so as to tend to, or to deprive, any applicant or employee of employment opportunity or adversely affect the employment opportunity of such persons.

Foreign students are required to provide an Employment Authorization Document (EAD) issued by the INS, Form I-688B or I-766.