

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Name: _____
 Last First Middle Maiden (if applicable)

Address: _____
 Number Street City, State Zip

Telephone: () E-mail: _____

Date of Birth: _____ State of Birth: _____ SSN: _____

Languages spoken other than English? _____ If so, please note: _____

EMPLOYMENT DESIRED

Position(s) applied for: _____

Hours per week desired (Min. & Max): _____ / _____

Desired Wage: _____

When are you available to start work? _____

Availability:

Hours	Monday	Tuesday	Wednesday	Thursday	Friday
8-12					
12-4					

Please mark an "X" for times you are available to work. You may list any variance in schedule, for example if you are available during the 8-12 time slot but can't start until 9:00, please list that.

REFERENCES

Please list below three persons not related to you who have knowledge of your work performance within the last 5 years.

Name	Email	Occupation
1.		
2.		
3.		
Did anyone working at GVLC refer you to the company? If applicable, please list their name.		

Acknowledgment of Employment Requirements

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 employment being terminated.

I understand that I must undergo a criminal background check, TB test, complete an in center 18-hour training with a BCBA, maintain a current in person CPR certification and complete applications to be approved as a credentialed provider (as applicable) prior to being assigned to work with clients. I understand I must complete the 40-hour Registered Behavior Technician (RBT) training and competency assessment within 60 days of hire and complete and pass the RBT exam within 90 days of hire. I understand this is a drug and alcohol free workplace.

Signature: _____ Date: _____

Printed Name: _____