

ROCK VALLEY COMMUNITY PROGRAMS, INC.

OUR MISSION:

RVCP, Inc.'s mission is to provide transitional and supportive housing and addictions and mental health treatment services to adults in the Rock County Area, through evidence based models for the future and continued success of our clients, transforming their lives in positive directions.

RVCP, Inc. will provide these services to homeless male veterans, clients connected to the criminal justice system, and outpatient care to anyone needing assistance with addiction and/or mental health treatment in Rock County and the surrounding areas.

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ABOUT OUR PROGRAMS:

◆ ROCK VALLEY COMMUNITY PROGRAMS, INC. (RVCP, Inc.) has been providing correctional services in Rock County since 1971, beginning with the opening of a residential service for parolees.

◆ The Residential Reentry Program houses Federal and State correctional clients and also supervise offenders who are placed on home confinement. We assist our Federal clients with finding the resources and tools needed to establish stable housing, education, employment, and other means of successfully transitioning back into the community. Our State clients are here for intensive programming meant to influence their thinking and behavioral patterns. Our goal for both Federal and State clients is to provide them the tools to be successful in society and reduce the likelihood of recidivism.

◆ Harpers Place is a 15 bed, 24 hour hospital diversion program. They provide immediate crisis stabilization services to consumers at risk of psychiatric hospitalization or in need of post-hospitalization support. Harper's Place provides a safe, homelike setting that includes monitoring, provision of nourishment, and emotional support with the goal of reducing or eliminating and individual's symptoms of mental illness. The priority and goal each day will focus on promoting recovery, resiliency and self-determination.

◆ In 2011 RVCP renovated 24 studio apartments to offer transitional housing and supportive services to veterans experiencing homelessness. Each unit can provide housing for 2 veterans experiencing homelessness making it possible to serve 48 at a time. RVCP, Inc. works in conjunction with other supportive service providers to offer a comprehensive menu of services and support that can be combined and readily adjusted to meet each individual's needs and pathways.

◆ Compass Behavioral Health Clinic (CBHC) is a WI certified clinic for outpatient substance use disorder and mental health treatment. CBHC is dedicated to providing quality mental health, substance abuse, and co-occurring disorders treatment utilizing evidence-based practices. CBHC clinicians address client's comprehensive mental health needs in a holistic manner using: Solution-Focused Brief Therapy (SFBT), Motivational Interviewing (MI), Mindfulness Meditation, Medication Assisted Treatment (MAT), and Cognitive Behavioral Therapy (CBT). CBHC has two location; the first in located at RVCP, Sunny Lane Road; the second is located at 1820 Center Ave. Janesville, WI.

◆ RVCP, Inc. expects the staff to be compassionate of the problems facing our clients, believe in the dignity and worth of human beings, respect the individual differences and have a commitment to the quality of care of our clients. This commitment requires personnel to have the professional background, resources and expertise necessary to provide effective quality services delivered with integrity and competence.

APPLICATION FOR POSITION:

- ◆ Please complete the attached application completely. You may either email (shmartin@rvcp.org) or drop off or mail the completed application at: 203 W. Sunny Lane Rd., Janesville, WI 53546, ATTN: Human Resource Director.
- ◆ Applications are retained on file for a period of three months, after that time you would need to complete a new application to be considered for position openings.
- ◆ Upon a conditional offer of employment, applicants are required to successfully complete a urine drug test, TB test, physical and criminal background investigation.

Good luck in your search for employment and thank you for your interest in
Rock Valley Community Programs, Inc.

An Equal Opportunity Employer

TEAM **RVCP**
TRANSFORMING
LIVES

An Equal Opportunity Employer. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or disability.

APPLICATION FOR EMPLOYMENT

PERSONAL

Last Name	First Name	Middle Name	Date:
Street Address			Home Phone:
City, State, Zip			Cellphone:
Have you ever applied for employment with us? __Yes__No If yes, Month and Year__Location			Email Address
Position Desired			Best time to reach you by phone:
Apart from absence for religious observance, are you available for full-time work? __Yes__No If not, what hours can you work?			Pay Expected:
Are you legally eligible for employment in the U.S.?			Will you work overtime if asked? __Yes__No
Which Shift(s) are you available? 1 st 2 nd 3 rd			
Which Days of the Week are you available? Sun Mon Tues Wed Thurs Fri Sat			Date available to begin work:
Other special training or skills (languages, machines, etc.)			
How did you learn of our organization?			

EDUCATION

School	Name and Location of School	Course of Study	No. Years Completed	Did You Graduate	Degree
Professional Credentials / Licenses					
College					
High					
Other					

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record start with most recent employer.

Company Name	Telephone
Address	Employed (Month/Year) From _____ To
Name of Supervisor	Hourly/Salary Start _____ Last
State Job Title and Describe Your Work	Reason For Leaving

Company Name	Telephone
Address	Employed (Month/Year) From _____ To
Name of Supervisor	Hourly/Salary Start _____ Last
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State Job Title and Describe Your Work	Reason For Leaving

We may contact the employers listed above unless you indicate otherwise.

-OVER-**DO NOT CONTACT**

Employer Number(s)

Reason _____

APPLICANT: PLEASE COMPLETE THE ENTIRE PAGE

MILITARY

COMPLETE THIS SECTION IF YOU SERVED IN THE U.S. ARMED FORCES.	Branch of Service
Describe Your Duties and Any Special Training:	Period of Active Duty (Month/Year) From _____ To
Rank at Final Discharge:	Date of Final Discharge:

MEMBERSHIP

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS
(Exclude those which may disclose your race, color, religion or national origin.)

GENERAL BACKGROUND QUESTIONS

Have you ever been convicted of a crime (including federal, state and local offenses) which has NOT been annulled, expunged or sealed by a court? ____Yes ____No If yes, describe in full, including dates.

Please note: Disclosure of above information will not automatically disqualify an applicant. This information will only be considered in relation to the ability of the applicant to obtain clearance to work with offenders.

Have you ever received any tickets for traffic violations, municipal/city violations, etc.?
____Yes ____No If yes, please describe in full, including dates.

Please note: Disclosure of above information will not automatically disqualify an applicant. This information will only be considered in relation to the ability of the applicant to obtain clearance to work with offenders.

Do you have a valid driver's license? ____Yes ____No

Are you considered a high risk driver for insurance purposes? ____Yes ____No

State name of relatives and friends currently employed by RVCP, Inc.

APPLICANT SIGNATURE

The information provided in this application for employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

If you decide to investigate my personal history as well as all statements contained in this application, I authorize you to do so.

Date _____ **Signature** _____

The information requested in this application is for a legally permissible reason, including without limitation, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal Law also prohibits discrimination on the basis of age with respect to certain individuals as well as on the basis of physical or mental disability. The Laws of most States also prohibits this type of discrimination as well as some additional types of discrimination such as on the basis of ancestry or marital status.

**ROCK VALLEY COMMUNITY PROGRAMS, INC.
EMPLOYMENT REFERENCE
DISCLOSURE AUTHORIZATION AND RELEASE**

Applicants: Please provide a minimum of two professional references. Please indicate the relationship to the reference and a phone number or email they can be reached at during business hours, or note if it is only an after hour phone number.

I hereby authorize:

1. _____
First & Last Name Phone Number/Email

Nature of relationship (Past employer, supervisor, co-worker, personal acquaintance, etc.)

2. _____
First & Last Name Phone Number/Email

Nature of relationship (Past employer, supervisor, co-worker, personal acquaintance, etc.)

3. _____
First & Last Name Phone Number/Email

Nature of relationship (Past employer, supervisor, co-worker, personal acquaintance, etc.)

4. _____
First & Last Name Phone Number/Email

Nature of relationship (Past employer, supervisor, co-worker, personal acquaintance, etc.)

And its employees to provide any and all information they deem appropriate regarding my employment and job performance to Rock Valley Community Programs, Inc. and any of its employees, representatives and agents. This information may be provided either verbally or in writing. In addition to authorize the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against Rock Valley Community Programs, Inc. and its employees, representatives and agents; I release Rock Valley Community Programs, Inc. and its employees, representatives and agents from any and all liabilities, claims, or damages that may directly or indirectly result from the use, disclosure or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

Signature

Date

VOLUNTARY AFFIRMATIVE ACTION INFORMATION

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation or any other legally protected status.

Date: _____

Position(s) applied for: _____

Referral Source:

<input type="checkbox"/>	Advertisement (Please specify):	<input type="checkbox"/>	Employee:
<input type="checkbox"/>	Friend:	<input type="checkbox"/>	Walk-in:
<input type="checkbox"/>	School:	<input type="checkbox"/>	Other:

Applicant's Name: _____

Address: _____ Phone: _____

As required, we comply with government regulations including Affirmative Action obligations where they apply.

In an effort to comply with requirements regarding government record keeping, reporting and other legal obligations, we ask that you complete this applicant data survey. Your cooperation is appreciated.

Please be advised that your survey is not part of your official application for employment. It is considered confidential information that will not be used in any hiring decision.

Check one: Male Female

Check one of the following Ethnicity Groups: Hispanic/Latino Not Hispanic/Latino

Check one of the following Race Groups:

White African American or African Native Hawaiian / Pacific Islander

American Indian/Alaskan Native Asian More Than One Race

Check if you are a disabled individual: _____

SPECIAL NOTICE TO VIETNAM ERA VETERANS, DISABLED VETERANS AND INDIVIDUALS WITH PHYSICAL OR MENTAL DISABILITIES:

Government contractors subject to the Vietnam Era Veterans Readjustment Act of 1974 and the Readjustment Act of 1973 are required to take Affirmative Action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and qualified disabled individuals.

IF YOU SO WISH TO BE IDENTIFIED, PLEASE CHECK IF ANY OF THE FOLLOWING ARE APPLICABLE:

Vietnam Era Special Disabled Newly Separated Other Protected
 Veteran Veteran Veteran Veteran

To be completed by applicant – not for interview purposes – to be filed separately from application. This information is to be used to satisfy the Affirmative Action requirements of Section 503 of the Rehabilitation Act or necessitated by another federal law or regulation.

11/09/2017



Rock Valley Community Programs, Inc.

203 W. Sunny Lane Road · Janesville, Wisconsin 53546

Phone: (608) 741-4500 · Fax: (608) 741-4502

RVCP is required to comply with the Prison Rape Elimination Act (PREA) for community confinement centers. As part of this compliance RVCP is required to ask the following questions and document your response.

1. Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution?

2. Have you been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?

3. Have you been civilly or administratively adjudicated to have engaged in the activities described in #2 above?

By signing below you understand that material omissions regarding such misconduct, or the provision of materially false information, will be grounds for termination.

Printed Name

Signature

Date