

HR date: _____
 Position: _____ Location: _____
 Termination Date: _____
 Eligible for Rehire: _____
 Notes: _____



SHOREHAVEN
 INCORPORATED

1040 Singerly Road Elkton, Maryland 21921

Application for Employment

Shorehaven, Inc. is an equal opportunity employer and does not discriminate against any applicant for employment based on age, color, marital status, national origin, race, religion, sex, sexual orientation, genetic information, qualified individuals with disabilities, veteran status or citizenship.

Date _____

Personal Data (please print)

 Last Name First Middle *Valid Drivers License? Yes No

 Street City State Zip Code

 Home Phone Business Phone Are you 21 years old or older? Yes / No (circle one)

Education

High School Name & Address	Dates		Major Course	Diploma Received
	From	To		
College Name & Address	Dates		Major Course	Diploma Received
	From	To		
Graduate School Name & Address	Dates		Major Course	Diploma Received
	From	To		
Other (Specify)	Dates		Major Course	Diploma Received
	From	To		
Scholastic Honors:				

Skills/Certifications _____

A child protective services background check will be conducted in the state of Maryland and in the applicant's state of residence. Signature _____

Position Desired? _____

Full-Time Part-Time Temporary Volunteer

Who referred you to us (Agency, School, Employee, Newspaper, Other)? _____

Have you previously been interviewed by our agency? _____

Have you previously been employed by our agency? _____

Are you related to anyone currently employed by our agency? _____

If yes, please state name and relationship _____

If your application is considered favorably, on what date can you start work? _____

Employment History (List Current or Most Recent Position First)

Employer _____ ()
Phone _____

Address _____

Supervisor _____ Employment Dates (From-To) _____

Position _____ Salary (From-To) _____

Nature of Work _____

Reason for Leaving _____

Did you have direct contact with minors in this position? _____ May we contact your employer? _____

Employer _____ ()
Phone _____

Address _____

Supervisor _____ Employment Dates (From-To) _____

Position _____ Salary (From-To) _____

Nature of Work _____

Reason for Leaving _____

Did you have direct contact with minors in this position? _____ May we contact your employer? _____

Employer _____ ()
Phone _____

Address _____

Supervisor _____ Employment Dates (From-To) _____

Position _____ Salary (From-To) _____

Nature of Work _____

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Did you have direct contact with minors in this position? _____ May we contact your employer? _____

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Phone _____

Address _____

Supervisor _____ Employment Dates (From-To) _____

Position _____ Salary (From-To) _____

Nature of Work _____

Reason for Leaving _____

Did you have direct contact with minors in this position? _____ May we contact your employer? _____

Additional Information

What job (or activity) have you most enjoyed? Why? _____

What job (or activity) have you least enjoyed? Why? _____

References

Professional References

Name	Company/Address	Phone

Personal References

Name	Address	Phone

Criminal Background Disclosure Statement

Criminal Background Disclosure Statement

Have you ever been convicted of, pleaded guilty or nolo contendere to, received a not criminally responsible disposition or received probation before judgment for any crime (felony, misdemeanor, or traffic violation)? **Yes** **No** If yes, please use the space below to state the crime, the date, and the status of the charge.

Are any criminal charges or proceedings pending against you? **Yes** **No** If yes, please explain in the space provided below.

A conviction record is not necessarily a bar to employment. Each application will be considered individually, taking into account the nature and seriousness of the offense, how long ago it occurred, and the extent of rehabilitation. You may omit information regarding convictions which have been expunged.

Certification

The information I have given here is true and complete to the best of my knowledge. I understand and agree that any false statements of information and/or omission of information may disqualify me from further consideration for employment and shall warrant my dismissal in the event I am hired.

I acknowledge that if hired, I will be an at-will employee and will be subject to dismissal or discipline without notice or cause, at the discretion of Shorehaven, Inc.

Applicant Signature: _____ **Date:** _____



Employment Reference Check

Applicant's Name: _____
Last First Middle/Maiden

I hereby authorize _____ of _____
 to release information requested on this form and any other information regarding my employment history with you. I understand that this information will be used to evaluate my qualifications for employment with Shorehaven, Inc.

 Signature Date

TO BE COMPLETED BY EMPLOYER:

Company Name: _____

Position Held: _____ General Responsibilities: _____

Employed From: _____ To: _____ Ending Salary: \$ _____ per _____

Currently Employed: Yes ___ No ___ Eligible for Rehire: Yes ___ No ___

Reason given for leaving: _____

Performance Factors: *1-Excellent 2-Good 3-Satisfactory 4-Unsatisfactory*

Attendance		Quality of work		Dependability	
Initiative		Job Knowledge		Ability to work with others	

Are you aware of any information that might question this individual's suitability for employment where he/she would come into direct contact with individuals with developmental disabilities? Yes ___ No ___

If yes, please provide full details &/or other sources that could furnish additional information. _____

 Signature/ Title Date

OFFICE USE ONLY

COMPLETED BY: } MAIL	} FAX	} PHONE
REFERENCE CHECKED BY:		DATE: