



Western Arkansas Child Development

14 W. Cherry Street - Alma, AR 72921

866.538.9223

Application for Employment

Site _____

APPLICANT INFORMATION

Last Name		First		MI	Today's Date	
Street Address				Apartment/Unit #		
City		State		ZIP		
Contact Phone(s)		E-mail				
What position(s) are you applying for?						
What days and hours are you available?						
What date are you available to start work?				Desired Rate of Pay		
Are there any reasons why you would be unable to perform the tasks involved with the positions you are applying for?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:	
Are you over the age of 18?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you have an immediate relative who works for WACD?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you legally eligible to accept work and remain in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	All offers of employment are contingent upon verification of identity and work authorization in the United States.		
Have you ever worked for WACD?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?		
Have you been convicted of a misdemeanor or felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Conviction of a crime does not automatically bar employment. We will consider offense, frequency, recentness and relation to job in question.		
If yes, explain the circumstances:						

EDUCATION

High School		City/State	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
College		City/State	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree
Other		City/State	
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/> Degree

PREVIOUS EMPLOYMENT (START WITH MOST RECENT AND LIST FOR MINIMUM OF PREVIOUS SIX YEARS)

Company		Phone	
Address		Supervisor	
Job Title	From	To	Starting Salary \$ Ending Salary \$
Responsibilities		Reason for Leaving	
May we contact this company for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Company					Phone							
Address					Supervisor							
Job Title			From			To			Starting Salary	\$	Ending Salary	\$
Responsibilities						Reason for Leaving						
May we contact this company for a reference?					YES	<input type="checkbox"/>	NO	<input type="checkbox"/>				
Company					Phone							
Address					Supervisor							
Job Title			From			To			Starting Salary	\$	Ending Salary	\$
Responsibilities						Reason for Leaving						
May we contact this company for a reference?					YES	<input type="checkbox"/>	NO	<input type="checkbox"/>				
Company					Phone							
Address					Supervisor							
Job Title			From			To			Starting Salary	\$	Ending Salary	\$
Responsibilities						Reason for Leaving						
May we contact this company for a reference?					YES	<input type="checkbox"/>	NO	<input type="checkbox"/>				
Company					Phone							
Address					Supervisor							
Job Title			From			To			Starting Salary	\$	Ending Salary	\$
Responsibilities						Reason for Leaving						
May we contact this company for a reference?					YES	<input type="checkbox"/>	NO	<input type="checkbox"/>				
REFERENCES (LIST THREE PROFESSIONAL REFERENCES)												
Full Name					Relationship							
Company					Phone							
Address					E-mail							
Full Name					Relationship							
Company					Phone							
Address					E-mail							
Full Name					Relationship							
Company					Phone							
Address					E-mail							

MILITARY SERVICE

Branch		From		To	
Rank at Discharge		Type of Discharge			
If other than honorable, explain:					

QUESTIONS

Briefly explain why you are a suitable fit for this job. Include why you would like to have this job.

Give an example of how you have made a positive contribution to a team and what the outcome was.

What would your most recent supervisor say about you?

Describe yourself in five words.

DISCLAIMER AND SIGNATURE

I hereby authorize WACD to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications. I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive any right to bring any cause of action against those individuals for defamation, invasion of privacy or any other reason because of their statements. I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I understand that any offer of employment and continued employment with WACD is contingent on satisfactory criminal and maltreatment registry background checks. I further understand that no one at WACD is authorized to enter into any written or verbal employment contract with me for any definite period of time without the express consent of the Executive Director of WACD. I also understand my employment is "at-will" and may be terminated by myself or WACD at any time for any reason or no reason at all, with or without prior notice.

I certify that my answers to the questions on this application are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed by WACD, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for immediate discharge.

Signature		Date	
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