



Application for Employment

Basic Information

Name

Last First Middle

Address

Street City Zip

Telephone

- Position/type of work desired Salary Requirements
- Position/type of work applying for
- When are you available for employment?

Are you now employed? Yes No

*Have you ever been fired or forced to resign from a position you held? Yes No

*Are you on layoff or subject to recall? Yes No

*Have you ever been convicted of a felony or have a record of founded child or dependent adult abuse? Yes No

Are you currently eligible for employment in the United States? Yes No

Do you have a valid driver's license? Yes No

Current license number #

Can you provide your own transportation on the job? Yes No

Do you have auto insurance? Yes No

Insurance Limits: Aggregate bodily injury:
 Aggregate property damage:
 Underinsured motorist:
 Uninsured motorist:

Record of Education -- Schools attended

Secondary

Name Address

College

Name Address

Post graduate

Name Address

Degrees Earned

Degree College/University

Degree College/University

Degree College/University

**If you answered yes to these questions, please explain in the interview.*

Additional Education, Experience, Licensure, or Published Works

Skills Inventory

<input type="checkbox"/> Bilingual(indicate which languages)	<input type="checkbox"/> CPI	<input type="checkbox"/> Report Writing
<input type="checkbox"/> Budgeting	<input type="checkbox"/> Office Management	<input type="checkbox"/> Substance Abuse Treatment
<input type="checkbox"/> Case Management	<input type="checkbox"/> Oral and Written Communication	<input type="checkbox"/> Supervisory Experience
<input type="checkbox"/> Community Organizing	<input type="checkbox"/> Organization	<input type="checkbox"/> Team-Building
<input type="checkbox"/> Computer Literate (indicate which programs)	<input type="checkbox"/> Personnel Evaluation	<input type="checkbox"/> Therapy (specify type)
<input type="checkbox"/> Crisis Counseling	<input type="checkbox"/> Planning and Goal Setting	<input type="checkbox"/> Training (specify type)
<input type="checkbox"/> Cultural Diversity Awareness	<input type="checkbox"/> Program Development	<input type="checkbox"/> Typing
<input type="checkbox"/> First Aid/CPR	<input type="checkbox"/> Play Therapy	<input type="checkbox"/> Other Click or tap here to enter text.

Employment History

Please provide your employment history for the last ten years, listing your most recent employment experience first.

Employment Dates Month/Year	Position Title and Ending Salary	Employer's Name, Supervisor's Name, Company's Address, City, State, Zip, and Telephone	Reason for Leaving
from/to			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
from/to			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
from/to			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
from/to			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
from/to			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employment References (Please reference former employers or work-related associates.)

Name and Title	Address, City, State, Zip	Telephone	Years Known

Please read the following carefully.

- This application for employment is considered active for one year from the date signed.
- Nothing contained in this employment application or in the employment interview is intended to create an employment contract between the applicant and Bethany for Children & Families.
- Bethany for Children & Families reserves the right to terminate employment for any reason.
- Public Law 91-508 requires that Bethany for Children & Families advise the applicant that a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics, and mode of living. You have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of any such investigative report that is made.
- Bethany for Children & Families requires verification of education credentials for all employment applicants.
- Bethany for Children & Families requires successful completion of a Criminal Background Check and a verification of clearance from the Child Abuse Network Tracking System (CANTS).
- Bethany for Children & Families is required by state and federal law to conduct a variety of background checks on applicants and employees prior to or at the time of hire and sometimes ongoing. These may include some or all of the following:
 - DCFS background check, including sex offender registries, abuse registries and criminal records. This requires fingerprinting.
 - Illinois Child Abuse Network Tracking System (CANTS).
 - Illinois Health Care Worker Registry (also known as the Nurse Aide Registry) for any excluding criminal convictions and any indicated abuse reports.
 - Iowa SING (Single Contact Repository for background checks) for any founded abuse reports and criminal history, including the Sex Offender Registry.
 - Federal OIG (Office of Inspector General) Exclusion list for exclusion from providing services funded by a federal healthcare program to be completed prior to an employment offer and ongoing through employment. Bethany for Children & Families will need to gather additional information from you to proceed with this verification process.
- Bethany for Children & Families requires employees to possess a valid driver's license and proof of insurance in order to transport clients in the delivery of social services.
- The Immigration Reform and Control Act of 1986 requires that employers hire only citizens and aliens lawfully authorized to work in the United States. All Bethany for Children & Families employees must complete and sign the verification form designated by the Immigration and Naturalization Service (Form I-9). Bethany is also required to examine certain documentation presented by the employee, record it on the I-9 form, and sign the form by the first day of the applicant's employment.

I hereby give Bethany for Children & Families the right to make a thorough investigation of my past employment, education, and activities, and I release from all liability anyone supplying such information. I indemnify Bethany for Children & Families against liability which might result from making such an investigation. I understand that the findings during the investigation of my background will be used to make decisions about my employment initially and ongoing, and may be sufficient cause for denial of employment or discharge from employment. I further understand that any false answer or statement or implication made by me in this application or other required documentation shall be considered sufficient cause for denial of employment or discharge from employment.

I have read and understand the above provided information and I acknowledge that the information given in this application is true and correct to the best of my knowledge.

Signature (Please print, sign, and date the hard copy) _____ Date _____

Application Questionnaire

As part of the application procedure, all applicants are requested to respond to the questions listed below.

What is your reason(s) for seeking employment with Bethany for Children & Families?

What do you consider the single most important characteristic, quality, or skill you would bring to the position for which you have applied?

What do you believe to be your single most important achievement in your employment to date?

What do you believe to be your greatest strengths and any areas of improvement that you would bring to this position?

Interview Notes:

Revised August 1, 2022