Dear Prospective Employee:

Welcome to OPEN DOORS, INC.! We are excited that you are interested in working with us! To ensure that we provide the best possible assistance to the individuals we serve, you will need to supply us with the following information:

* + A completed application.
	+ A resume or letter of intent.
	+ A copy of your high school diploma/GED.
	+ A copy of any other degrees or certificates (CPR, First Aid, Crisis Intervention Training).
	+ These trainings will be provided by us if hired.
	+ A copy of your driving license. (All applicants must be at least 18 years of age)
	+ A copy of your driving record. (MVR from the DMV)

Once you have submitted this information, your application will be processed. This includes various background checks. If you are selected for possible employment, you will be contacted for an interview.

The interview process is a way for us both to gain a better understanding of each other. It will explain in more detail the mission of OPEN DOORS, INC. and the type of work that you may be doing if employed for services.

Thanks for applying with OPEN DOORS, INC. where you can help make a difference in someone’s life!

Sincerely,

Liz Pitzer, HRM

**OPEN DOORS, INC.**

Application for Employment

Position applying for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Today’s Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alias or other name you are known by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last four digits of Social Security # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years here \_\_\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

Previous Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years there \_\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

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

Are you seeking full or part-time employment? Full Part-time Either

Are you available for day shift, night shift, or both? Day Night Both

Are you currently employed? Yes No

If yes, why do you want to change jobs? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been employed by OPEN DOORS, INC. before? Yes No

If yes, when? From \_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_ When are you available to begin working? \_\_\_\_\_\_\_\_\_\_\_

How much do you expect to make? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per \_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been terminated by an employer? Yes No

If yes, please give a brief explanation. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of a felony? Yes No

If yes, please give date, nature of the offense, and disposition of case. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(A conviction record will not necessarily be a barrier to employment. Factors such as age, time of the offense, seriousness, the nature of the violation, and rehabilitation will be taken into account.)*

FOR OFFICE USE ONLY

\_\_\_\_\_ Complete App. \_\_\_\_\_ SS Card \_\_\_\_\_ Car Insurance

\_\_\_\_\_ Resume/Letter \_\_\_\_\_ MVR \_\_\_\_\_ CPR exp. \_\_\_\_\_\_\_\_

\_\_\_\_\_ GED/Diploma \_\_\_\_\_ MVR Permission \_\_\_\_\_ CPI

\_\_\_\_\_ Driving License \_\_\_\_\_ Ref. Authorization \_\_\_\_\_ First Aid exp. \_\_\_\_\_\_\_\_

Application for Employment, Continued

**EDUCATION**

Name of High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Did you graduate? YES NO

Name of College \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Field of Study \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Education \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any types of machinery, equipment, or software that you are trained to operate:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any job related licenses or certificates that you currently hold:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever served in the U.S. Armed Forces? YES NO If yes, which branch? \_\_\_\_\_\_\_\_\_\_\_\_\_

Did you receive an honorable discharge? YES NO

If no, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFERENCES**

It is the policy of OPEN DOORS, INC. to require each employee to have three personal and three professional references in their personnel file. Please be sure to include complete addresses and phone numbers for individuals that you list as a reference. All applications submitted without complete addresses will not be processed. References will be conducted by mail and /or phone.

***PERSONAL REFERENCES***

*(Please list three individuals, not related to you, who have knowledge of your personality, skills, and habits.)*

Name Address Phone #

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_)\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_)\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_)\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

***PROFESSIONAL REFERENCES***

*(Please list three individuals, not related to you, from former employers, who have knowledge of your integrity, dependability, initiative, and work performance).*

Name Address Phone #

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_)\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_)\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_)\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

Application for Employment, Continued

**EXPERIENCE**

Most recent employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

Date Hired \_\_\_\_\_\_\_\_\_\_ Date Left \_\_\_\_\_\_\_\_\_\_ Reason for leaving \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you quit, did you give notice? YES NO Starting Salary \_\_\_\_\_\_\_\_\_\_ Ending Salary \_\_\_\_\_\_\_\_\_\_

If still employed, may we contact your present employer? YES NO

Describe your duties \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will your employment record show that you attended work regularly and performed reasonably well? YES NO

Name of past employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

Date Hired \_\_\_\_\_\_\_\_\_\_ Date Left \_\_\_\_\_\_\_\_\_\_ Reason for leaving \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you quit, did you give notice? YES NO Starting Salary \_\_\_\_\_\_\_\_\_\_ Ending Salary \_\_\_\_\_\_\_\_\_\_

Describe your duties \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will your employment record show that you attended work regularly and performed reasonably well? YES NO

Name of past employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Street City State Zip*

Date Hired \_\_\_\_\_\_\_\_\_\_ Date Left \_\_\_\_\_\_\_\_\_\_ Reason for leaving \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you quit, did you give notice? YES NO Starting Salary \_\_\_\_\_\_\_\_\_\_ Ending Salary \_\_\_\_\_\_\_\_\_\_

Describe your duties \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will your employment record show that you attended work regularly and performed reasonably well? YES NO

*Please attach a list of names, addresses, dates of employment, and reason for leaving all other companies you have worked for in the last ten years.*

Application for Employment, Continued

**EMPLOYEE REFERENCE**

If you were referred to OPEN DOORS, INC. by a current employee, please give his/her name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DRIVING APPLICANTS**

Please list all traffic violations (other than parking tickets) for which you knowingly have been convicted or forfeited bond or collateral during the last 36 months. The list must be true and complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please completely list all motor vehicle accidents you have been involved in during the last 36 months, including the nature of accident and any injuries/fatalities. The list must be true and complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever had your privilege, license, or permit to operate a motor vehicle suspended, denied, or revoked? YES NO

If yes, please give details \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a current drivers or commercial drivers license? YES NO

License # \_\_\_\_\_\_\_\_\_\_\_\_\_\_ State of Issue \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**JOB APPLICANT’S AGREEMENT AND CERTIFICATION**

I authorize the investigation of all matters contained in this application and hereby give OPEN DOORS, INC. permission to contact schools, references, previous employers (unless otherwise indicated), and others, and hereby release OPEN DOORS, INC. from any liability as a result of such contact. I understand that any misrepresentation or omission of important facts and relevant information called for is a just cause for dismissal at any time without previous notice. I further understand that the first ninety days of employment with OPEN DOORS, INC. shall be a trial period, and further, that at any time during the trial period and thereafter, my “at will” employment relationship with OPEN DOORS, INC. is terminable for any or no reason by either party. If employed, I understand that OPEN DOORS, INC. may unilaterally change or revise fringe benefits, policies, and procedures, and such changes may include reduction in benefits. I understand that my employment is contingent upon meeting the requirements of the Immigration Reform and Control Act of 1986. If no action is taken on this application within 365 days of signature, it will be destroyed. I certify that this application was completed by me and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature of applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OPEN DOORS, INC.

Please sign and date ALL lines.

*OPEN DOORS, INC.*

I authorize past employers, all references, and any other person or persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages because of having furnished such.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*OPEN DOORS, INC.*

I authorize past employers, all references, and any other person or persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages because of having furnished such.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*OPEN DOORS, INC.*

I authorize past employers, all references, and any other person or persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages because of having furnished such.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*OPEN DOORS, INC.*

I authorize past employers, all references, and any other person or persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages because of having furnished such.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*OPEN DOORS, INC.*

I authorize past employers, all references, and any other person or persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages because of having furnished such.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TO: Amber Hinkle, Executive Director

 Lin Preston, Financial Director

SUBJECT: Motor Vehicle Record

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, herby grant permission for Open Doors, Inc. to review my motor vehicle driving record. My driver’s license number is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and expires on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I understand that if my driving record does not meet company or insurance guidelines, my right to operate company vehicles will be withdrawn. Furthermore, I understand that if my driving record is unacceptable that I may lose my job at Open Doors, Inc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date