



## ***EMPLOYMENT APPLICATION***

### 1. Employer Information

Employer: Emmanuel Family Services  
Address: P.O. Box 12191  
City/State/Zip: Lynchburg, Virginia 24506  
Telephone: (434)473-3344 OR (434)473-3343

It is the policy of Emmanuel Family Services to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

### 2. Applicant Information

Applicant Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Number of years at this address: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

### 3. Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

4. Job Position Applied For: \_\_\_\_\_

5. Salary Desired: \$ \_\_\_\_\_ per \_\_\_\_\_

6. Who referred you to our company? \_\_\_\_\_
7. Have you applied to our company previously? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, when? \_\_\_\_\_
8. Are you at least 18 years old? \_\_\_\_\_ Yes \_\_\_\_\_ No
9. How will you get to work? \_\_\_\_\_
10. Driver's License Number: \_\_\_\_\_  
What state issued your license? \_\_\_\_\_
11. Are you willing to work any shift, including nights and weekends? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If no, please state any limitations:  
\_\_\_\_\_
12. If you are offered employment, when would you be available to begin work?  
\_\_\_\_\_
13. Are you legally eligible for employment in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No
14. Are you able to perform the essential functions of the job position with  
or without reasonable accommodation? \_\_\_\_\_ Yes \_\_\_\_\_ No  
  
What reasonable accommodation, if any, would you require?  
\_\_\_\_\_
15. Have you ever been convicted of any crime, including traffic violations?  
\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please describe:  
\_\_\_\_\_

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN  
AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF  
EMPLOYMENT.

17. Applicant's Skills

List any skills that may be useful for the job you are seeking. Enter the number of years of  
experience, and circle the number which corresponds to your ability for each particular skill.  
(One represents poor ability, while five represents exceptional ability.)

Skill	Years of Experience	Ability or Rating				
		1	2	3	4	5
_____	_____	1	2	3	4	5
_____	_____	1	2	3	4	5

16. Applicant's Education and Training

College Name and Address

\_\_\_\_\_

Did you receive a degree? \_\_\_\_\_ Yes \_\_\_\_\_ No    If yes, degree received: \_\_\_\_\_

High School Name and Address

\_\_\_\_\_

Last Grade? \_\_\_\_\_ 9 \_\_\_\_\_ 10 \_\_\_\_\_ 11 \_\_\_\_\_ 12    Diploma? \_\_\_\_\_ Yes \_\_\_\_\_ No

Other Training (graduate, technical, vocational):

\_\_\_\_\_

Awards, Honors, Special Achievements:

\_\_\_\_\_

18. References

List any two people who would be willing to provide a reference for you.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

19. Please provide any other information that you believe should be considered:

\_\_\_\_\_

\_\_\_\_\_

**PLEASE ATTACH YOUR RESUME**

## **CERTIFICATION**

I certify that the information provided on this Application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my Application, or if employment commences, immediate termination.

I authorize Emmanuel Family Services to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Owner, the employment relationship will be entirely voluntary in nature. In other words, with appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer would have the same right. Moreover, no agent, representative, or employee of Emmanuel Family Services, except in a specific written contract of employment signed on behalf of the organization by its Owner, has the power to alter or vary the voluntary nature of the employment relationship.

**I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.**

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

## **Final Checklist for Employment Application**

**April 03, 2009**

### **Make It Legal**

\_\_\_\_\_ The Employment Application should be signed and dated by the Applicant on the appropriate line of the Application.

### **Copies**

\_\_\_\_\_ If the Applicant is hired, a copy of their Application should be kept in their permanent personnel file. Otherwise, a copy of the Application may be retained for a predetermined number of months to be referred to when other employment opportunities become available.

### **Other Information**

- \* Laws governing employment are very specific regarding what is legal to ask on an employment application or during a job interview. It is essential to be familiar with these laws when undertaking to hire applicants for any position.

### **Reasons to Update**

- \* To incorporate a change in federal or state employment law.
- \* To fill a different position.