



Sanilac Area Violence Elimination Council Application for Employment

Date of Application: _____

(Please Print)

Name: _____
(First) (Middle) (Last) (Maiden or other last names)

Address: _____

Phone: _____ E-mail: _____

Emergency Contact: _____ Contact Number: _____

All applicants must be at least 18 years of age, and agree to a criminal background check.

Check one: Employed _____ Unemployed _____ Self-Employed _____ Retired _____

If employed, name of employer: _____ years employed _____

May we contact your current employer? _____ Current Supervisor: _____

Are you currently on a Lay-off Status and subject to recall? _____ Are you a college student? _____

Previous employer: _____ reason for leaving: _____

Previous employers: _____

Volunteer/Civic

Experience: _____

Education: High School _____ College _____ Graduate School _____ Professional/Technical _____

Special skills: _____

Schools attended: _____

Background:

Have you ever been convicted of a crime? No _____ Yes _____ If yes, state nature of offense, when and where it occurred: _____

(Conviction will not necessarily disqualify an applicant from employment)

How did you hear about us? Referred by: _____
_____ Advertisement _____ Friend _____ Employment Agency _____ Relative _____ Other

Are you available for an personal interview? _____

On what date are you available to begin work? _____

Are you agreeable to attend training before you are officially hired? _____

Are you available to work _____ full time _____ part time _____ shift work/on call _____ temporary _____ volunteer

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of non-job-related medical conditions or handicap, or any other legally protected status.

We are an equal opportunity employer, however, we want to ensure our personnel are of the highest quality, support our mission, and will maintain the highest level of confidentiality, courtesy, and commitment to our clients.

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 182 days (6 months). Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview (s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview _____ Yes _____ No

Remarks _____

Interviewer _____ Date _____

Employed _____ yes _____ no Date of Employment _____

Job Title _____ Hour Rate/Salary _____

Authorized by: _____ Date _____

NOTES: _____

SANILAC AREA VIOLENCE ELIMINATION COUNCIL

PRE-EMPLOYMENT INVESTIGATION AUTHORIZATION

In connection with my application for Employment with the SAVE Council, I understand that I must agree to participate in a pre-employment investigation that may be conducted by the Sanilac Area Violence Elimination Council or an assigned agency.

I understand that this investigation may make inquiries into my:

- | | |
|---------------------------------------|-----------------------------|
| Criminal History | Previous Employment History |
| Civil Claims History | Personal References |
| Motor Vehicle Driving Record History | Academic Achievements |
| Credit History | Professional Licenses |
| Previous Worker's Compensation Claims | Professional Affiliations |

I understand that Sanilac Area Violence Elimination Council requires certain additional identifiers to obtain accurate information about me and I agree to provide the following information to assist in this investigation:

Applicants Name: _____

Previous Names (Maiden): _____

Date of Birth #: _____

Drivers License #: _____

I hereby authorize any person, company, corporation, public or private institution and/or government agency to release my information requested by Sanilac Area Violence Elimination Council or by any assigned investigator and to accept any photocopy or facsimile of this document as if it were the original.

I release and hold harmless Sanilac Area Violence Elimination Council and its' respective employees and agents; and all person, individuals, companies, corporations, public or private institutions and government agencies from any and all claims that I may have, at any time, arising from or relating to the gathering, reporting , documenting or providing of any information in relation to this pre-employment investigation.

I authorize Sanilac Area Violence Elimination Council or any assigned agency to provide the result of this pre-employment investigation to the hiring entity and understand that all information gathered, reported, documented and provided to Sanilac Area Violence Elimination Council will remain the sole property of said agency and will not be released to me.

I have read and understand this document. By affixing my signature below, I hereby authorize Sanilac Area Violence Elimination Council to conduct a pre-employment investigation subject to the above terms and conditions.

Signature _____ Date: _____