



# APPLICATION FOR EMPLOYMENT

## GENERAL INFORMATION

Name (Last)	(First)	(M)	Telephone (_____)
Address (Mailing Address)	(City)	(State)	(Zip Code)
E-Mail Address		Are you legally entitled to work in the U.S.? <input type="checkbox"/> yes <input type="checkbox"/> no	

## POSITION

	<input type="checkbox"/> Part-time <input type="checkbox"/> Full-time	<input type="checkbox"/> Day <input type="checkbox"/> Residential <input type="checkbox"/> one on one staff
<input type="checkbox"/> Yes <input type="checkbox"/> No		

## EDUCATION AND TRAINING

<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, list the highest grade completed.
<b>College, Business School, Military (Most recent first)</b>
<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Yes <input type="checkbox"/> No
Special Skills (List all pertinent skills)

## WORK EXPERIENCE (Most Recent First)

<input type="checkbox"/> Yes <input type="checkbox"/> No	

**WORK EXPERIENCE (Most Recent First) Cont'd**

<b>Employer</b>	<b>Telephone number</b> ( ) -	<b>From (month/year)</b>
<b>Address</b>		<b>TO (month/year)</b>
<b>Job Title</b>		<b>Hours per week:</b>
<b>Specific Duties:</b>		<b>Last Salary:</b>
<b>Reason for Leaving</b>		<b>May we contact this employer?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**Personal Reference: List individuals who are familiar with your work**

<b>Name</b>	<b>Address</b>	<b>Phone #</b>	<b>Indicate Relationship</b>

I, \_\_\_\_\_, do hereby authorize the following individuals/agencies to release information related to my employment to KNC, Inc. (Kim i Nichols Center).

List employers here:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Miscellaneous Information**

I have a car available and I will to utilize it in the performance of my duties	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have a current, VALID driver's license	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have automobile insurance on my vehicle, or I am willing to place insurance which meets KNC Requirements (Liability insurance \$100,00/\$300,00 per person, per accident)	<input type="checkbox"/> Yes <input type="checkbox"/> No
I can provide documentation that I am at least eighteen (18) years of age	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am willing to work overtime, if required by my position	<input type="checkbox"/> Yes <input type="checkbox"/> No
Based on a review of the description of the job of which you have applied, are you able to meet and/or perform the qualifications, requirements, and job specifications as defined in the job description.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you every pleaded guilty, or been found guilty of a crime, civilian or military? If yes, please provide details.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Conditions of Hire:

**KNC requires a driving record check from the NH - Dept. of Safety or from state with current, valid driver's license before employment commences.**

**KNC requires a physical examination before employment commences.**

**KNC requires a Criminal Record check from NH-Dept of Safety after being hired.**

**Additionally – KNC requires that all employees undergo a blood or urine test as a condition of pre-employment screening.**

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

Interviewer's Comments:
