



Application for Employment

(PLEASE PRINT CLEARLY)

Youth Emergency Services does not discriminate based upon race, color, national origin, sex, age, disability, marital status or sexual orientation.

Date of Application: _____

Your Name	(Last)	(First)	(MI)	Social Security Number
Present Address	(Street)	(City)	(Zip Code)	Telephone Number
Are you over 21 years of age? YES NO		Are you lawfully able to work in the United States? YES NO		
Position Applied For:	Shift Preferences:	Rate of Pay Desired: \$ _____ Per	Date Available	
Circle Appropriately: Full Time Part Time On Call Any Available If Part Time, When:				
Are you able to work on weekends, holidays or rotation of shifts? Specify Shifts Available: _____ Weekends: YES NO Holidays: YES NO				
Were you previously employed by us? Dates Employed:		YES NO	Position: Name on Employment Records:	Supervisor:
Education:	School Name	Years Completed	Field of Study	Diploma / Degree
High School:		9 10 11 12		
College		1 2 3 4		
Graduate/Professional		5 6 7 8		
Personal License, Certification or Registration Number		Expiration Date	Other States Where Registered	
Special Skills:			Typing Speed:	
Branch of U.S. Military Service:		Type of Discharge:	Duties/Special Training:	
List any other experiences, skills or qualifications you feel would especially qualify you for work at this agency:				
Have you ever been convicted of a crime? YES NO		If so, give details:		
Do you have a valid driver's license? YES NO		State Issued:	Number:	Expiration Date:
Family members or friends currently employed by Youth Emergency Services, Inc.:				

List below beginning with your most recent all present and past employment (include military):

Employer	Dates	Job Title/Duties		Reason for Leaving
Name and Address:	From:		Supervisor:	
Phone Number:	To:		Salary: \$ /	
Name and Address:	From:		Supervisor:	
Phone Number:	To:		Salary: \$ /	
Name and Address:	From:		Supervisor:	
Phone Number:	To:		Salary: \$ /	
Name and Address:	From:		Supervisor:	
Phone Number:	To:		Salary: \$ /	

Explain any periods of unemployment:

Provide any additional information relative to change of name, use of an assumed name or nickname, etc. necessary to enable a check on your work record.

Name of persons for professional references:

Name:	Occupation:
Address:	Phone Number:
Name:	Occupation:
Address:	Phone Number:

Applicant – Please Read Carefully

I authorize educational institutions, references, law enforcement agencies, private/state organizations, previous employers and current employers having information about me to release any and all information to YES. I am signing this voluntarily so that YES can evaluate my suitability for employment. I, therefore, waive and release those stated above from any and all claims and causes of action in law or equity, including but not limited to, defamation of character or invasion of privacy, which may arise from responding to YES' request for information.

I hereby authorize the release to the Human Resources Department of *Youth Emergency Services, Inc.* (YES) the results of my medical exam, including any sampling of fluids, performed by any doctors or clinics to which I am referred by YES. I further authorize the Human Resources Department to release information contained to those within YES with an interest in my potential employment.

I hereby certify that my answers to this application are true and complete. I understand that false or misleading information on my application or in my interview may result in my not being considered for employment and, if hired, may lead to termination of my employment.

Date	Signature of Applicant
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(Please Read Carefully)

As an applicant for a position with *Youth Emergency Services, Inc.*, I understand and agree to the following:

I certify that the statements made in this application are true and correct to the best of my knowledge. I understand that falsification of this information could result in summary termination of my employment. Permission is hereby granted to obtain verification of the statements made herein and to obtain references.

I authorize the references listed herein to release any and all information concerning my previous employment and any pertinent information they may have, personal and otherwise, and release all parties from liability for any damage that may result from furnishing same.

In making this application for employment, I understand that any investigation may be made in which information is obtained through inquiries made to my neighbors, previous employers, current employers, friends, associates, others with whom I am acquainted and/or others who may have knowledge of me. These inquiries may include information regarding my character, general reputation and other personal characteristics that determine my fitness for working with youth.

I understand that as a pre-condition to an offer of employment, Youth Emergency Services, Inc. will evaluate my skills, abilities, knowledge and overall suitability for employment. The evaluation can include the results of pre-employment tests, interviews, reference checks, drug screening and performance tests. I understand that if I am offered employment, the job is conditional upon the results of a medical examination. I consent to taking the test(s) required for the position for which I have applied.

I understand that before beginning any employment, I must provide proof of citizenship or other authority to work in the United States.

I understand that if I am employed, I will serve an initial assessment period. In consideration of any employment, I agree to conform to the rules and regulations of Youth Emergency Services and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time at the option of either Youth Emergency Services or myself. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by Youth Emergency Services. I understand that no representative of the agency other than the Executive Director or his designee have any authority to enter into any contract or agreement contrary to the foregoing and then, only if such commitment is in a signed, written agreement.

Youth Emergency Services, Inc. has a long and proud history of promoting and maintaining equal opportunity in accordance with all federal and state laws. Youth Emergency Services recruits, hires, trains and promotes persons in all job classifications without regard to race, color, religion, sex, age, non-job-related disability, national origin, marital status or sexual orientation. Youth Emergency Services retains the right to use all applicable constitutional, statutory, regulatory and/or executive branch exemptions from prohibitions against employment discrimination. This includes decisions calculated by Youth Emergency Services to promote the organizational values for which the agency are established or maintained. All selections are based on objective, job-related criteria.

Thank you for your interest in considering employment with Youth Emergency Services, Inc.

Applicant Signature

Date