



PO Box 2400
 Los Lunas, NM 87031
 (505) 565-4470
 Fax: (505) 866-9527

APPLICATION FOR EMPLOYMENT

1 . P e r s o n a l			
Last Name	First	Middle	Date
Street Address			Home Phone () - e-mail-
City, State, Zip			Cell Phone () -
Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Month and Year _____			Social Security No.
Have you ever been employed with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Month and Year _____			Position Desired
Are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? _____			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally eligible for employment in the United States?	When will you be available to begin work?		Pay Expected
Driver's License No.	Driver's License State	Driver's License Expiration Date	

Verified by:

Date:

2 . E d u c a t i o n					
	Name & Location of School	Course of Study	No. of Years Completed	Did You Graduate?	Degree or Diploma
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Post Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Company Name	Telephone () -
Address	Employed (State Month and Year) From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason for Leaving

Verified by:

Date:

We will contact past employers unless you indicate those you do not want us to contact.	Do Not Contact
	Employer Number (s) _____ Reason _____

4. References. List three persons ***not*** related to you, who have definite knowledge of your qualifications and fitness for the position for which you are applying.

Professional References		
Full Name	Present Business Address and Phone Number	Occupation and relationship

Character References		
Full Name	Present Business Address and Phone Number	Occupation and relationship

5. DISCLOSURE

All employees considered for employment at El Ranchito de los Ninos must undergo a criminal background check, have a clean driving record and pass a drug screening.

Were you ever discharged or forced to resign from any position for misconduct or unsatisfactory service? Yes No

- If yes, please state details. _____

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Have you ever been involved in a CYFD investigation of abuse or neglect of Children or adults as the alleged perpetrator or household member? If so, provide the dates of all such investigations and the outcome of those investigations. Note: Failure to provide this information may lead to denial of your application.

___ Yes, I have been involved in a CYFD (or other protective service agency) investigation of abuse or neglect of children or adults as the alleged perpetrator or household member.

___ No, I have never been involved in a CYFD (or other protective service agency) investigation of abuse or neglect of children or adults as the alleged perpetrator or household member.

6. READ THE FOLLOWING CAREFULLY BEFORE SIGNING

A false answer to any questions in this statement may be grounds for not employing you, or for dismissing you after you begin work. Failure to submit documentation for education, licensure, etc., may disqualify the application from meeting the requirements.

I understand that all offers of employment are subject to the approval of the Board of Trustees and that I should not rely upon an offer of employment without the written approval of the Executive Director.

Signature (*Sign In Ink*)

Date

Notice: *Failure to sign your application will result in the application not being processed.*