



Champlain Community Services

Employment Application

512 Troy Avenue,
Colchester, VT 05446
call: (802) 655-0511 or fax: (802) 655-5207

Write only in the areas provided. If you require more space, please staple additional paper to the application. This application must be completed in full, even if a resume is attached. Stray marks or failure to complete all parts of this application may result in rejection of this application.

If you need any assistance or accommodation in completing this application form or any part of our interview process, please notify us.

Name: First: _____ Middle: _____ Last: _____ Email: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Phone: Home: _____ Cell: _____

Position(s) Applying For (list titles): _____, _____ Date Available: _____

Availability to Work:

Full Time Part Time Per Diem Temporary Summer Internship

Evenings Weekends Holidays Overnights Days

Have you ever been employed by this Agency before? _____ (If so, when and which program): _____

Referral Source: I heard about these job opportunities from:

| | | | | | |
|--------------------------|---------------------|--------------------------|-------------------|--------------------------|-----------------|
| <input type="checkbox"/> | CCS Website | <input type="checkbox"/> | Employee | <input type="checkbox"/> | Other _____ |
| <input type="checkbox"/> | Job Fair | <input type="checkbox"/> | Publication _____ | <input type="checkbox"/> | Newspaper _____ |
| <input type="checkbox"/> | Job Posting | <input type="checkbox"/> | College _____ | | |
| <input type="checkbox"/> | Department of Labor | <input type="checkbox"/> | Jobs in Vermont | | |

Are you able to provide verification of your right to work in the United States upon hire?
 Yes No

Person to be notified in case of an emergency:

Name: _____ Address: _____

Phone #'s: _____, select one: home , cell , work

_____ , select one: home , cell , work

It is the policy of Champlain Community Services, Inc. to consider applicants for all positions and other conditions of employment without regard to race, color, gender, religion, age, disability, national origin, marital or civil union status, uniformed service, veteran status, sexual orientation, place of birth, citizenship, ancestry, gender identity, a positive result from an HIV-related blood test, genetic information or any other legally protected status.

Education:

High School: Name: _____ State: _____ Diploma: _____

College: Name: _____ State: _____ Degree obtained: _____

Grad School: Name: _____ State: _____ Degree obtained: _____

Professional Licenses/Certifications:

Are you currently: Registered Licensed Certified
Eligible for: Registration Licensure Certification

Professional License Information: Type: _____ Issuing State: _____ Date Issued: _____
Expiration Date: _____ Number: _____

Have you ever had a license conditioned, suspended or revoked or otherwise restricted? Yes
 No
If yes, please provide dates & explain: _____

Current Certification or Training Experience: (check those that apply)

First Aid CPR Signing
Medication Administration SCIP/NAPPI Physical Intervention

Have you ever been formally disciplined, asked to resign or been terminated by a former employer for any reason? Yes No. Explain: _____

Conviction Information:

Have you ever been convicted or had findings substantiated against you for acts related to emotional, physical or sexual abuse? Yes No. If yes, please explain: _____

Have you ever been **convicted** of any criminal acts in the past 10 years? Yes No.
If yes, please explain: _____

Have you ever been **convicted** of an offense related to sexual misconduct or violence? Yes
 No. If yes, please explain: _____

Have you ever been convicted of a motor vehicle violation in the past 10 years? Yes No.
If yes, please **list all motor vehicle violations:** _____

Record of conviction(s) on criminal charges or substantial findings, will not necessarily bar an applicant from consideration for employment. This data will be one factor considered in light of the relationship of the nature of the conviction to the position for which you are applying.

Employment Experience:

Start with your present or last job and include **ALL** of your past employment. Include any job related military service, volunteer activities or part time employment. Make sure phone numbers are accurate and complete. If you need additional space, please continue on a separate sheet of paper.

| | |
|--|----------------------------------|
| Employer _____ | Dates Employed _____ |
| Address _____ | Duties _____ |
| Phone #: _____ | Your Last Name While there _____ |
| Your Job Title _____ | Your Supervisor _____ |
| Reason for Leaving _____ | |
| Is this your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, may we contact them? Yes <input type="checkbox"/> No <input type="checkbox"/> | |

| | |
|--------------------------|----------------------------------|
| Employer _____ | Dates Employed _____ |
| Address _____ | Duties _____ |
| Phone #: _____ | Your Last Name While there _____ |
| Your Job Title _____ | Your Supervisor _____ |
| Reason for Leaving _____ | |

| | |
|--------------------------|----------------------------------|
| Employer _____ | Dates Employed _____ |
| Address _____ | Duties _____ |
| Phone #: _____ | Your Last Name While there _____ |
| Your Job Title _____ | Your Supervisor _____ |
| Reason for Leaving _____ | |

References:

Please list 3 references who are NOT relatives, employers, or otherwise mentioned in this application.

1. Name: _____ Email: _____ Phone Number(s) _____
How do you know this person? _____

2. Name: _____ Email: _____ Phone Number(s) _____
How do you know this person? _____

3. Name: _____ Email: _____ Phone Number(s) _____
How do you know this person? _____

Pre-Employment Authorization & Release:

I understand that Champlain Community Services will verify all data that I have provided on my application, resumé, related documents and interviews. I authorize and consent to have Champlain Community Services carry out inquiries connected with my application for employment, contract-for-services or volunteer work. I further understand these inquiries may include (but are not limited to) requests for information about my character, work habits, performance, experience and qualifications, reasons for terminations from previous employment and other information deemed relevant to my application.

I acknowledge and agree that references, prior employers and other individuals or businesses providing Champlain Community Services with information about me are doing so at my request and for my benefit.

I hereby hold harmless Champlain Community Services and the individuals or businesses providing information related to my application for employment/contract or volunteer position. I hereby release these entities and persons from any and all liability for damages of any nature as a result of obtaining or furnishing such reference and background information.

I acknowledge and understand that Champlain Community Services follows an “employment-at-will” policy and practice. As a result, if I am hired, Champlain Community Services, as the employer, or I, as the employee, may terminate my employment at any time and for any reason that is consistent with Champlain Community Services policies and applicable state and federal laws, or my employment may be terminated for no reason.

I hereby certify that all statements made by me on this application, my resumé, documents related to my application for employment/contract or volunteer position are accurate and true to the best of my knowledge. I understand and agree that any falsification or omission in this application and background information may result in refusal to employ me, contract with me or place me in a volunteer position. Also, based on any provision (or causing the provision) of false information or omission of information, Champlain Community Services may terminate my employment, contract or volunteer work. If I become employed, enter into a contract or am placed in a volunteer position with Champlain Community Services, then I agree to abide by all the Agency’s policies, procedures, rules and regulations, any applicable code of ethics, professional licensure rules and applicable laws.

I acknowledge and agree that, if I choose to submit this Employment Application to Champlain Community Services via fax or electronically (for example, by submitting a pdf file using CCS’ website), then – by doing so – my pre-employment authorizations, certifications, releases, and agreements outlined above are valid, effective, and binding with a copy of my signature or without any signature and are granted by virtue of my submission of this application by fax or electronic means, respectively.

Signature: _____

Date: _____

