



APPLICATION FOR EMPLOYMENT

PLEASE PRINT OR TYPE PAGES 1-8
(All Applicants will be tested for illegal drug use.)

DATE:

Name:

Last First Middle Maiden

Current Address:

Number Street City State Zip Code

How Long:

Previous Address:

Number Street City State Zip Code

How Long:

Telephone: () - -

Social Security NO. - -

If under 18, please list age:

Position Applied for:

Days/hours available to work

Mon _____ Fri _____
Tues _____ Sat _____
Wed _____ Sun _____
Thurs _____
No Preference _____

Salary Desired :

How many hours can you work weekly? _____

Employment Desired : Full-Time ONLY Part-Time ONLY Full or Part- Time

When available for work? _____

Have you applied to Children's Focus Foundation before? Yes No

Have you worked for Children's Focus Foundation? Yes No

Education	Name & City	Location (Complete Mailing Address)	# of Years Completed	Graduated	Degree Received /Major
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	
Business or Trade School				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Do You Have A Driver's License? Yes No

What is your means of transportation to work? _____

Driver's License:

Number: _____ - _____ - _____ State of Issue _____ Operator Commercial(CDL) Chauffeur

Expiration Date: _____

Have you had any accidents during the past three years? _____ How many? _____

Have you had any moving violations during the past three years? _____ How many? _____

Driver's Record (Previous 5 years) required.

Typing: Yes No WPM: _____

Microsoft Word: Yes No

Microsoft Outlook : Yes No

Microsoft Excel: Yes No

Microsoft Powerpoint: Yes No

Personal Computer: PC MAC

Please provide three professional references:(Please do not list any friends or relatives.)

1. _____

No: (_____) _____ - _____

2. _____

No: (_____) _____ - _____

3. _____

No: (_____) _____ - _____

For all positions applied for, the following clearances are required. If you have any of these clearances, please indicate below: (Note: CFSA-Child and Family Services Agency Child Protection Register Clearances)

*Protection Clearances Expire within a two year period. If you reside outside DC, MD, or VA clearances are also required.

1. DC/CFSA Protection Clearance: Yes No

MD/CFSA Protection Clearance: Yes No

VA/CFSA Protection Clearance: Yes No

2. DC/Police/FBI Clearance: Yes No

MD/Police/FBI Clearance: Yes No

VA/Police/FBI Clearance: Yes No

* If you reside outside DC, MD, or VA clearances are also required.

3. CPR Certificate: Yes No

First Aid: Yes No

Food Handlers License: Yes No

Suicide Prevention: Yes No

4. Have you ever been in the Armed Forces? Yes No

Are you currently a member of the National Guard? Yes No

Specialty: _____ Date Entered: _____ Discharge Date: _____

Work Experience

Please list your work experience for the past five years beginning with your most recent job held. If you are self-employed please provide firm name. Attach additional sheets if necessary.

*Name of Employer: _____ _____ _____ Address: _____ _____ _____	Job Title: _____ Brief Job Description: _____ _____ _____
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Name of Supervisor: _____ Telephone No: (____)____-____ Email: _____	Employment Dates: From: _____ To: _____	Annual Salary: From: _____ To: _____	May we contact your Employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Late
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Reason for leaving:

Work Experience

Please list your work experience for the past five years beginning with your most recent job held. If you are self-employed please provide firm name. Attach additional sheets if necessary.

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Reason for leaving:

CLEARANCE PROCESS

As a potential employee of Children’s Focus Foundation., you will be required to provide the following clearances for the District of Columbia. If you are not a resident of the District of Columbia, you must provide clearances for both the District of Columbia and the state in which you reside.

Please note: You will be responsible for all fees associated with obtaining the required clearances.

All fees are non-refundable.

Criminal History Child Protection Health Certificate Drug Screening
(Police & FBI)

ALL OFFERS OF EMPLOYMENT WILL BE CONTINGENT UPON SUCCESSFUL COMPLETION AND SATISFACTORY RESULTS OF EACH CLEARANCE.

Have you ever been convicted of any law violation (except minor traffic violation)? Yes No

If yes, please give details. Please note, a “yes” answer does not automatically disqualify you from employment with CFF; however, prior to hire you will be required to provide proof of the disposition of each charge. Failure to reveal information is grounds for termination of employment, if hired.

Please read carefully before signing:

I understand that this employment application and any other Children’s Focus Foundation documents are not contracts of employment and that any individual who is hired may voluntarily leave employment and may be terminated by Children’s Focus Foundation at any time and for any legal reason. I understand that Children’s Focus Foundation is an at-will employer and that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. I further understand that Children’s Focus Foundation can change its rules, policies, wages and benefits at any time, with or without advance notice.

The information I have provided on this application (and on the attached or previously emailed resume, if applicable) is accurate and complete to the best of my knowledge and subject to validation by Children’s Focus Foundation. Any withholding of information or making false or misleading statements or omission on this application may result in rejection of employment, or if employed, termination of employment. Unless noted otherwise, I authorize the organizations, schools, or persons named in this application, to give Children’s Focus Foundation any information it requests regarding my employment or academic history. I hereby release those organizations, schools, or persons from any liability for any damage whatsoever as a result of issuing this information. Information contained in this application may be disseminated to other agencies, nongovernmental organizations or systems on a need-to-know basis as determined by the agency head or designee.

I consent to criminal history background checks, drug testing, FBI and child protection clearances.

In the event an offer of employment is made, the offer will be subject to my providing documentation proving identity and eligibility for employment in the United States as required by the Immigration Reform and Control Act of 1986.

Date _____

Applicant Signature*

Print Name

*If you are submitting this application electronically, completion of the ‘Applicant Signature’ box shall constitute your understanding of and agreement to the terms and conditions of this application.

Thank you for your interest in employment with Children’s Focus Foundation

