



APPLICATION FOR EMPLOYMENT

Personal Enrichment through Mental Health Services, Inc. is an Equal Employment Opportunity Employer which makes employment decisions without regard to race, color, sex, religion, national origin, age, handicap, disability, marital status and all other characteristics protected by law. The Company also reasonably accommodates individuals with handicaps, disabilities and bona fide religious beliefs.

Personal Enrichment through Mental Health Services, Inc. is a Drug-Free Workplace.

(Please PRINT and Completely Answer all Questions)

POSITION APPLIED FOR: _____ DATE: _____

PERSONAL DATA

Last Name	First	Middle	()	
Street Address	City	State/Zip Code	Telephone Number	

Are you at least 18 years old? YES NO If NO, state your age for child labor law purposes only: _

For what shift are you applying: _____

Are there any days, shifts or hours you will not work? YES NO _____

Will you work overtime if required? YES NO

When will you be able to start work? _____

Have you ever been convicted of any crime? YES NO *(A conviction will not necessarily disqualify you)*

If YES, explain and give dates: _____

Can you, within three days after employment, submit documentation verifying that you are legally eligible to work in the United States? YES NO

Have you taken any illegal drugs in the last 30 days? YES NO

How did you learn of our Company: _____

Have you ever applied or worked here before? YES NO If YES, provide dates: _____

List any relatives or friends currently employed here: _____

EMPLOYMENT HISTORY (Please complete for all full-time or part-time employment beginning with most recent employer)

Company Name: _____	Telephone #: (____) _____
Address: _____ _____	Dates Employed: From: _____ To: _____
Name of Supervisor: _____	Weekly Pay:
State job titles and describe job duties: _____ _____ _____	Start: _____ Last: _____
	Reason for Leaving: _____ _____ _____

Company Name: _____	Telephone #: (____) _____
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State job titles and describe job duties: _____ _____ _____	Reason for Leaving: _____ _____ _____

Please explain any gaps in your employment history: _____

Have you ever been discharged or asked to resign? YES NO If YES, explain: _____

Did you receive any discipline in the last 12 months of active employment? YES NO

If YES, explain: _____

Were you given a performance evaluation within the last 12 months of active employment? YES NO

If yes, what was the range of scores used and what was your score: _____

MILITARY (Complete only if you served in the military)

Branch of Service: _____ Dates of Service: From: _____ To: _____

Rank at Discharge: _____ Date of Discharge: _____

Were you honorably discharged? YES NO

Describe any military skills, training or experience you believe are relevant to the job applied for:

EDUCATION (May or may not be considered depending on job applied for)

Check all that apply: GED Certificate High School Diploma College Degree

Name and location of last high school attended: _____

Degree: A.A. B.S./B.A. J.D. M.A./M.S. Ph.D.

College Attended: _____

Major: _____ Degree: _____

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Major: _____ Degree: _____

College Attended: _____

Major: _____ Degree: _____

Vocational/Training, Trade, Business, Armed Forces and other schools and special training:

School Attended: _____ From: _____ To: _____

Program: _____ Certificate: _____ Hours: _____

School Attended: _____ From: _____ To: _____

Program: _____ Certificate: _____ Hours: _____

School Attended: _____ From: _____ To: _____

Program: _____ Certificate: _____ Hours: _____

List Equipment you are experienced in operating, i.e., personal computer, tractor trailer, switchboard:

List software packages with which you are proficient, i.e., Word, Excel, etc. _____

Clerical Skills: Typing _____ wpm Data Entry: _____

Indicate any licenses and certifications showing licensing authority, where the license was first issued, and the date the license expires (except vehicle operator's license).

DRIVING RECORD (May or may not be considered depending on job applied for)

Do you have a valid drivers license? YES NO License Number: _____

Have you had any tickets? YES NO

If YES, explain: _____

Has your license ever been suspended or revoked? YES NO

If YES, explain: _____

Do you have any DUI or DWI convictions? YES NO

If YES, explain: _____

Do you have a reliable form of transportation to work? YES NO

If you have your own car: Make: _____ Year: _____ Tag #: _____

APPLICANT'S ACKNOWLEDGEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document will disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentation or omissions of facts in any application document will be cause for my dismissal at any time without prior notice.

I understand that any employment offer is contingent upon successful background screening through the Department of Children and Families and/or the Department of Juvenile Justice, reference checks from current and prior employers, and a drug test.

I authorize all past employers and educational institutions to release all requested information about my work history and education for use in determining my qualifications for employment.

I understand that, if employed, my employment with the Employer is not for a specific term and may be terminated by me or the Employer with or without notice or cause at any time. I further understand that no oral promise, Employer policy, custom, business practice or other procedure (including the Employer's Personnel Handbook or any personnel manuals) constitute an employment contract or modification of the at-will employment relationship between me and the Employer.

I release my former/current employer from any liability or damages for having furnished this information.

Applicant's Signature

Date

Please tell us why you have chosen to work in the mental health field. Include qualities that you have that will benefit psychiatric patients.