

Youth Advocate Services

825 Grandview Ave. Columbus, OH 43215 p: 614.258.9927 | f: 614.487.9319 Send resume, cover letter and this application to jacqueline.diaz@yasohio.org

Employment Application

| | | | Арр | licar | t Information | | | |
|--|----------|--|----------------------|--------------------------------|--------------------------------|------------------|--------------|----------|
| Full Name: | e: | | | Date: | | | | |
| | Last | | First | • | M.I. | | | |
| Address: | | | | | | | | |
| | Street | Address | | | | Apar | tment/Unit # | <u>!</u> |
| | | | | | | | | |
| | City | | | | State | ZIP (| Code | |
| Phone: | | | | | Email | | | |
| Date Availa | ble: _ | | | | Desired Salary: | | | |
| Position Ap | plied f | or: | | | | | | |
| Availability | : 🗆 | Full Time | rt Time s than 35 | | ☐ Temporary | | ☐ Contra | act |
| Are you a ci | tizen of | the United States? | YES | NO | If no, are you authorized to w | ork in the U.S.? | YES | NO |
| Have you ev | er wor | ked for this company? | YES | NO | If yes, when? | | | |
| Have you ev | | n convicted of a felony | YES | NO | If yes, explain: | | | |
| Do you have access to an automobile for daily work-related travel? | | YES | NO | Do you have a valid driver's I | icense? | YES | NO | |
| | | | | | License #: | Issuing State: | Ехр: | |
| · · · · · · · | | | NO | If yes, explain: | | | | |
| If you are c | urrentl | y employed, why are yo | ou inter | ested | in changing agencies and/o | or positions? | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| How did yo | u hear | about the position you | are app | olying | for: | | | |
| ☐ College/S | School | Counselor, Social Worker & Marriage & Family Therapist Board | Current YAS II | | _ | deed 🔲 L | inkedIn | |
| Other (sp | ecify): | | | | | | | |

| performing, in a | reasonable mar | | ed in t | he job | Id prevent you from or occupation for which a non-job-related medical condition | YES | NO |
|-------------------|-------------------|---|----------|---------|---|-----|----|
| If yes, explain: | | | | | | | |
| | | | | | | | |
| duties you canno | ot perform in a r | of positions for which y easonable manner, becasideration without regard to the | ause of | a phys | | YES | NO |
| If yes, explain: | | | | | | | |
| | | Educ | ation | | | | |
| High School: | | City, Stat | e: | | | | |
| From: | То: | Did you graduate? | YES | NO | Diploma: | | |
| College: | | City, Stat | e: | | | | |
| From: | To: | Did you graduate? | YES | NO | Degree: | | |
| Other: | | City, Stat | e: | | | | |
| From: | To: | Did you graduate? | YES | NO | Degree: | | |
| Describe any rele | evant specialize | ed training, skills, honors | s receiv | ed and | d/or extra-curricular activitie | es: | |
| | | | | | | | |
| | | | | | | | |
| | | Civic Organization: se your race, color, religion or | national | origin | | | |
| | | | | | | | |
| Places list three | profossional raf | Refero | | (011 05 | d are not provious ampleus | | |
| | • | | | | d are not previous employer | | |
| | | | | | Relationship: | | |
| Addrose: | | | | | | | |
| | | | | | | | |
| | | | | | Phone: | | |
| Address: | | | | | <u>-</u> | | |

| Full Name: | | Relationship: | | |
|------------------|---|-----------------------------------|--|--|
| Company: | | Phone: | | |
| Address: | | | | |
| | | | | |
| _ | Previous Employment | | | |
| Danim with warm | | | | |
| and military ser | r present or most recent employer. Include internship/apprentic vice, if any | esnip experience, volunteer work, | | |
| Company: | • | Phone: | | |
| | | | | |
| Address. | | Supervisor. | | |
| Job Title: | Starting Salary: | Ending Salary: | | |
| Responsibilities | s: | | | |
| From: | To: Reason for Leaving: | | | |
| | YES NO | | | |
| May we contact | your previous supervisor for a reference? | | | |
| | | | | |
| Company: | | Phone: | | |
| | | Supervisor: | | |
| | | | | |
| Job Title: | Starting Salary: | Ending Salary: | | |
| Responsibilities | s: | | | |
| From: | To: Reason for Leaving: | | | |
| | YES NO | | | |
| May we contact | your previous supervisor for a reference? | | | |
| | | | | |
| _ | | | | |
| | | Phone: | | |
| Address: | | Supervisor: | | |
| Job Title: | Starting Salary: | Ending Salary: | | |
| Responsibilities | s: | | | |
| From: | To: Reason for Leaving: | | | |
| May we contact | YES NO your previous supervisor for a reference? | | | |
| | | | | |

| Have you ever been asked to leave a job or wer | e terminated? | YES | NO | | |
|---|--|--------------|--------|--|--|
| If yes, explain: | | | | | |
| | | | | | |
| | | | | | |
| Summarize special skills and qualifications acquould benefit you in the position you applied for | quired from employment, or other experience(s), to or and/or as a YAS employee: | hat you fo | eel | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Explain why you believe you would enjoy work for youth: | ing with youth and with an agency which serves a | and advo | cates | | |
| | | | | | |
| | | | | | |
| | | | | | |
| State any additional information you feel may h | elp us in considering your application: | | | | |
| | 3) : | | | | |
| | | | | | |
| | | | | | |
| Discl | aimer and Signature | | | | |
| I certify that my answers are true and complete | to the best of my knowledge. | | _ | | |
| I authorize investigation of all statements and in necessary in arriving at an employment decision | formation contained in this application for employm n. | nent as m | ay be | | |
| I understand that this application is not, and is no | ot intended to be, a contract for employment. | | | | |
| If this application leads to employment, I unders interview may result in my release. | tand that false or misleading information in my app | olication o | r | | |
| Signature: | Date: | Date: | | | |
| | to race, color, Religion, sex, national origin, age, marital or | r veteran st | tatus, | | |
| | n-job-related medical condition or handicap. | | , | | |
| FOR E | MPLOYER USE ONLY | | | | |
| | o not write below this line | <u> </u> | | | |
| DATE RESUME RECEIVED: | DATE OFFICIAL TRANSCRIP(S) RECEIVED: | | | | |
| DATE PERSONAL REFERENCE CHECKS COMPLETED: | DATE EMPLOYER REFERENCE CHECKS COMPLETED: | | | | |
| DATE(S) OF INTERVIEW(S): | DATE CRIMINAL RECORDS CHECK RECEIVED: | | | | |
| POSITION OFFERED ON (date): | POSITION ACCEPTED/REJECTED ON (date): | | | | |
| DATE OF EMPLOYMENT: | DATE OF EMPLOYMENT LETTER: | | | | |