



Family Enrichment Network
 24 Cherry Street, POB 997
 Johnson City, NY 13790-0997
 (607) 723-8313 (607) 723-6173 (fax)

Application for Employment

Personal Information	Last Name, First, Middle	Date
	Street Address	Home Phone
	City, State, Zip	Other Phone
	Were you previously employed by us? <input type="checkbox"/> Yes <input type="checkbox"/> No	Email Address
	If yes, when?	
	Position(s) applied for:	
	What date would you be available to work?	
	Are you legally eligible for employment in the U.S.A. <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(if hired, you are required to submit proof of eligibility to work in the U.S.A.)</i>	

Education Information	School	Name & Address of School	Degree	Course of Study <i>Major/Minor</i>	Graduate?	
	High School					<input type="checkbox"/> Yes <input type="checkbox"/> No
	College					<input type="checkbox"/> Yes <input type="checkbox"/> No
College					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (specify)					<input type="checkbox"/> Yes <input type="checkbox"/> No	

The Family Enrichment Network complies with federal and New York State anti-discrimination laws which prohibit discrimination based on gender, race, religion, marital or pregnancy status, sexual orientation, national origin, age, or disability. In compliance with these laws, personnel decisions will be made on the basis of merit and will be commensurate with Agency standards of excellence.

List below present & past employers, beginning with most recent

Employment History	Name & Address of Company	From		To		Last Hourly Salary	Last Annual Salary	Reason for Leaving	
		<i>Mo</i>	<i>Yr</i>	<i>Mo</i>	<i>Yr</i>				
		<i>Duties and Responsibilities:</i>							
	Telephone #	Name of Supervisor:							
	Can we contact this employer concerning your work experience? <input type="checkbox"/> Yes <input type="checkbox"/> No								
	Name & Address of Company	From		To		Last Hourly Salary	Last Annual Salary	Reason for Leaving	
		<i>Mo</i>	<i>Yr</i>	<i>Mo</i>	<i>Yr</i>				
		<i>Duties and Responsibilities:</i>							
	Telephone #	Name of Supervisor:							
	Can we contact this employer concerning your work experience? <input type="checkbox"/> Yes <input type="checkbox"/> No								
	Name & Address of Company	From		To		Last Hourly Salary	Last Annual Salary	Reason for Leaving	
		<i>Mo</i>	<i>Yr</i>	<i>Mo</i>	<i>Yr</i>				
		<i>Duties and Responsibilities:</i>							
	Telephone #	Name of Supervisor:							
	Can we contact this employer concerning your work experience? <input type="checkbox"/> Yes <input type="checkbox"/> No								
Name & Address of Company	From		To		Last Hourly Salary	Last Annual Salary	Reason for Leaving		
	<i>Mo</i>	<i>Yr</i>	<i>Mo</i>	<i>Yr</i>					
	<i>Duties and Responsibilities:</i>								
Telephone #	Name of Supervisor:								
Can we contact this employer concerning your work experience? <input type="checkbox"/> Yes <input type="checkbox"/> No									

I hereby give permission to contact those employers I have indicated above.

Signature

Criminal Background Check	Have you EVER been convicted of (or entered a plea of guilty to) a crime (felony, misdemeanor, or violation)? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, please give conviction date (or guilty plea date) and the nature of the offense.
	<i>I understand as a condition of employment I will be fingerprinted to conduct a criminal background check, in accordance with Section 390-b of the Social Services Law. A conviction record will not necessarily bar employment.</i>

Personal References	Please list three persons, who are not former employers or relatives, who can give references on your behalf.		
	Name	Address	Phone Number

Additional Info	Are there any other job related experiences, skills, or qualifications which will be of special benefit in the job for which you are applying?

I certify that the facts set forth in this application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in anyway if the employer decides to hire me. I understand that employment with the Family Enrichment Network is employment "at-will" and can be terminated by either party with or without notice, at any time, for any reason or no reason.

Signature

Date



For Office Use Only

HEAD START RECOMMENDATION TO SCREEN

Applicant Name: _____

Position Applying For: _____

Applicant meets minimum education and experience requirements

Reason for Recommendation: _____

Hiring Supervisor's Signature

Date

Policy Council Decision

Recommend proceeding with the interview process

Does not recommend proceeding with the interview process

Reason: _____

Policy Council Signatures

1. _____

Kate Grippen, Head Start Director

2. _____

Darrell R. Newvine, Executive Director

3. _____

Date

Date