

Last Name

River Valley Child Development Services, Inc. 611 Seventh Avenue, Ste 300 Huntington, WV 25701

Middle

Telephone: (304) 523-3417 Fax: (304) 523-2678

1-800-870-3417

e-mail: <u>SRatcliff@rvcds.org</u>

Return completed form and required documents to above address. Type or print using black ink.

First

| Present Address | | Phone | | | |
|---|----------------------------------|--|--|--|--|
| Permanent Address | | Phone | | | |
| E-mail address Cell Phone | | | | | |
| Position Applied For | | | | | |
| Have you ever been employed o | r applied for employment with us | s? If yes, when? | | | |
| Are you a citizen of the U. S.? If not, do you have proof of right | · | nce in the U.S.? Yes No | | | |
| Have you ever been convicted or | | | | | |
| If you are under age 18, can you | provide a work permit? | □ Yes □ No | | | |
| or certificate. | | an official transcript, copy of diploma, licer | | | |
| Circle highest grade completed: | | | | | |
| High School | Name & Address | Degree or Certificate | | | |
| College | Name & Address | Degree or Certificate | | | |
| Business, Vocational, Trade | Name & Address | Degree or Certificate | | | |
| Additional Training | Name & Address | Degree or Certificate | | | |
| Skills, Licenses and/or Certificati | | | | | |
| Are you attending school now? Yes No If yes, who Do you plan further educational so Yes No If yes, who | ere? study? What field? | | | | |

Employment Experience – List last four jobs held, starting with your present or last job. Explain any gaps in employment. You may attach a resume, but it **WILL NOT** be accepted in place of this application.

| iviay We | e contact your current employer? | |
|----------|---|--|
| | Employer | Type of Business |
| | Address | Employed (month & year) |
| | | From To |
| 1 | Telephone | Supervisor's Name & Title |
| | Job Title/Responsibilities/Tasks Performed | Reason for leaving |
| | | |
| | | |
| | Employer | Type of Business |
| | Address | Employed (month & year) |
| | | From To |
| 2 | Telephone | Supervisor's Name & Title |
| | Job Title/Responsibilities/Tasks Performed | Reason for leaving |
| | | |
| | <u>l</u> | <u> </u> |
| | Employer | Type of Business |
| | Address | Employed (month & year) |
| | 41 | |
| | | From To |
| 3 | Telephone | From To Supervisor's Name & Title |
| 3 | Telephone Job Title/Responsibilities/Tasks Performed | |
| 3 | | Supervisor's Name & Title |
| 3 | | Supervisor's Name & Title |
| 3 | | Supervisor's Name & Title |
| 3 | Job Title/Responsibilities/Tasks Performed | Supervisor's Name & Title Reason for leaving |
| 3 | Job Title/Responsibilities/Tasks Performed Employer | Supervisor's Name & Title Reason for leaving Type of Business |
| 3 | Job Title/Responsibilities/Tasks Performed Employer | Supervisor's Name & Title Reason for leaving Type of Business Employed (month & year) |
| | Job Title/Responsibilities/Tasks Performed Employer Address | Supervisor's Name & Title Reason for leaving Type of Business Employed (month & year) From To |
| | Job Title/Responsibilities/Tasks Performed Employer Address Telephone | Supervisor's Name & Title Reason for leaving Type of Business Employed (month & year) From To Supervisor's Name & Title |

| Name | Address, City, State, ZIP | Telephone, including area cod |
|------|---------------------------|-------------------------------|
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BUSINESS IN THE UNDERSTAND THAT AS Α STATE **WEST** VIRGINIA, EMPLOYER/EMPLOYEE RELATIONSHIP IS ESTABLISHED "AT-WILL." THE 'AT-WILL" RELATIONSHIP AFFORDS THE EMPLOYEE THE RIGHT TO RESIGN FOR ANY REASON. LIKEWISE, THE EMPLOYER MAY TERMINATE THE RELATIONSHIP AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR IT IS FURTHER UNDERSTOON THAT WITHOUT NOTICE. THE "AT-WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE ALTERED BY ANY WRITTEN DOCUMENT OR BY VERBAL AGREEMENT. UNLESS SUCH ALTERATION IS SPECIFICALLY ACKNOWLEDGED IN WRITING AND SIGNED BY AN **AUTHORIZED EXECUTIVE OF RIVER VALLEY CHILD DEVELOPMENT SERVICES.**

I understand that federal and state laws require agencies providing childcare services to conduct a **Criminal Background Check** and **Protective Services Record Check** on all applicants seeking employment. Therefore, I agree to submit to a criminal background and child protective services record check as a condition of employment. I understand I may be denied employment based on the outcome of the investigations or if hired as a "provisional" employee pending the outcome of the checks and if hired under this exception, continued employment is conditional upon the receipt of favorable reports.

I also understand that any offer of employment in child care, school age or home based programs may be conditioned upon a PPD (TB) test and completion of a physical exam to determine whether I can perform the job duties.

I understand that should I be offered employment I must pass a drug test and that continued employment is contingent upon the results of this test.

I authorize River Valley to make a thorough investigation into my past employment, education, criminal background and any other job related activities. I release from liability all persons, companies, corporations, educational institutions, law enforcement agencies and federal, state or local governments supplying such information and indemnify River Valley against any liability which might result from making such an investigation.

Additionally, I authorize River Valley to supply my employment record, in its sole discretion, in whole or in part, to any prospective employer, government agency or other party with an interest that River Valley deems appropriate. I will allow a photocopy or fax of this authorization to be as valid as the original.

I also understand and authorize that the information I have provided may be verified by contacting former employers, references, educational institutions, law enforcement agencies and federal state and local governments, including records verifying employment, education and criminal history.

| Cignoture of Applicant (uppigned applications will not be considered) | Data | |
|---|------|--|
| Signature of Applicant (unsigned applications will not be considered) | Date | |

EQUAL EMPLOYMENT OPPORTUNITY

In compliance with federal, state and local equal employment opportunity laws, River Valley assures all applicants of equal opportunity when applying for employment. No applicant will be discriminated against based on age, color, race, sex, national origin, ancestry, religion, creed, marital status, mental or physical disability, veteran status or any other non-job related factors.

| MEMO | |
|------------------------------|--|
| то: | All Applicants |
| FROM: | Human Resources |
| RE: | Addendum to Application |
| Please read | the following and return it with your completed application. |
| applica | is no guarantee of a job offer or job interview based upon your completion of our ation. Your completed application will be considered with those of others who have tted applications. Decisions about interviews will be based job requirements. |
| | pplication must be completely filled out in order for it to be considered as you ation for employment. |
| | information provided by you on our application cannot be satisfactorily verified by yment reference checks, your application will be considered incomplete. |
| for. " | ations are filed according to job title. Be as specific as possible in stating the job applied 'ANY POSITION" is not an acceptable response to "Position Applied For" on our ation blank. |
| | the number of applications we receive and consider and the competitive nature of our |
| 6. Upon | completing and submitting your application, you may be subject to the following: |
| | Drug/Alcohol tests Criminal Background check Driving Record check Employment and Character Reference checks Protective Services Record check |
| I have read t statements. | the above statements concerning my application for employment and understand these |
| Signature of | Applicant Date |
| | |

Child Care Questionnaire

Those individuals applying for positions in child care programs or school age/after school programs briefly explain how you would respond to the following situations:

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|----------|---|
| 1. | The teacher has just stepped out of the classroom. The children are working in the block area. Two children reach for the same block. An argument begins and both children hit each other. |
| 2. | The teacher is doing finger plays with the children during circle time on the carpet. You are putting materials on that table for the next scheduled activity. After a few minutes, two children lose interest and wander away from the group, distracting the other children. |
| 3. | You are working at the end of the day. As a parent is picking up his child he reads an accident report form that states his son received a minor injury that has been treated by the staff. The parent looks at you and angrily comments that this is the second injury his child has received this week. He asks if you are really watching the children carefully enough. |
| 4. | An employee at the center tells you that one of the program parents is having an illicit affair and continues to elaborate on the details. |
| Applic | ant's Signature Date |
| | —————————————————————————————————————— |

WORK AVAILABILITY CHECKLIST

Child Development Center and School Age Connections

| Name: | | | |
|---------------|------------------------------|-----------|--|
| Address: | | | |
| List telephor | ne numbers where we may cont | tact you: | |
| | | | |

Locations where you may be asked to work.

| Check | Name | Location | Program |
|-------|--|---|--------------------------|
| | Enterprise Child Development Center | 2021 W Fifth Avenue Huntington, WV 25704 | Child Development Center |
| | School Age Connections | Various – as needed | After school program |

What days and hours are you available to work?

| Day | Hours |
|-----------|-------|
| Monday | |
| Tuesday | |
| Wednesday | |
| Thursday | |
| Friday | |

Return this form along with your application.

RIVER VALLEY CHILD DEVELOPMENT SERVICES

Voluntary Self Identification Survey

In an effort to comply with regulations regarding government record keeping, reporting and other legal obligations, we ask you to complete this *Voluntary Self-Identification Survey*. The completion of this survey is not a part of your official application for employment. The survey contains confidential information and will not be used in hiring decisions. The survey will be filed separate and apart from your application.

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

| Date | / / | Social Sec | Social Security Number | | | | |
|-----------|---------------------------------------|------------------|---|-----------------|--------------|--------------------|----------|
| Applicant | 's Name | | | | | | |
| Address _ | | Last | First | N | liddle | | |
| | e Number | Street | City | S | tate | Zip | |
| Check Or | ne: 🗆 Male | □ Female | Da | te of Birth: | / , | / | |
| mixed rac | cial and/or national | origin, identify | tify your basic racia yourself by the cate ate category. Chec | gory with whi | ch you clo | | |
| | | | f Mexican, Puerto R n, regardless of rac | | Central A | merican, South | American |
| | White – A person East | having origins | s in any of the origin | al people of E | Europe, No | orth Africa or the | Middle |
| | Black or African-A | American – a p | erson having origin | s in one of the | e black rad | cial groups of Afi | ica |
| | Native Hawaiian o Hawaii, Guam, Sa | | der – A person hav Pacific Islands. | ng origins in | any of the | original people | of |
| | | | ive – a person havi tural identifications t | | | | of North |
| | Asian – A person | having origins | in the Indian subco | ntinent China | a, India, Ja | pan, Korea. | |
| | Two or more race | es | | | | | |
| | | | son who 1) has a dis such impairment, or | | | | |
| Do you ha | ave a disability? | | Yes | □ N | lo | | |
| Revised: | 04/18/13 | | | | | | |