

Willows Way, Inc.

800 Friedens Rd., Ste. 100, St. Charles, MO 63303

Phone: 636-757-0511, Fax: 636-757-0512 Email: hr@willowsway.org



APPLICATION FOR EMPLOYMENT

If at any time during the application or selection process, you believe you may require a special accommodation to perform the work for which you are applying, or assistance completing this application, please inform the Human Resources Department. **Please note that we do pre-employment drug screenings.**

Name: _____ Date of application: _____
(Last) (First) (MI)

Position(s) applying for:

- Direct Support Professional (Residential) Direct Support Professional (Community Integration Day Program)
 Support Coordinator (Some college/experience req. - Residential) Community Resource Coordinator (Degree req.)
 Supervisor/Manager (Degree + experience req.) Other: _____

Home Phone: _____ Cell Phone: _____ E-mail Address: _____

Address: _____
(Number/Street) (City) (State) (Zip Code)

Are you 18 years of age or older? Yes No Are you eligible to work in the United States? Yes No

How did you hear about this position? From Current Employee Name: _____

Ad: _____ Referral: _____ Other: _____
(Where?) (First/Last Name) (Please identify)

What type of employment are you seeking? Full-time Part-time; Number of hours desired per week: _____

Check all geographic work locations where you are willing to travel:

- St. Charles O'Fallon Wentzville/Lake St. Louis St. Peters South St. Louis City
 Kirkwood Florissant Valley Park Kirkwood University City Manchester
 Creve Coeur
 Anywhere in North St. Louis County Anywhere in South St. Louis County
 Anywhere in West St. Louis County Anywhere in St. Charles County

Have you ever been employed by Willows Way, Inc.? Yes No If Yes, during which years? _____

Have you ever worked indirectly for Willows Way through a temporary staffing agency? Yes No If Yes, during which years? _____
For what company? _____

Do you *currently* work indirectly for Willows Way through a temporary staffing agency? Yes No If Yes, for what company do you work?

Are you related to anyone either working for or receiving services from Willows Way, Inc.? Yes No If Yes, to whom are you related and what is the relationship? _____

Have you previously applied for employment with Willows Way? Yes No

Work History (Begin with *most recent* employer)

Employer: _____ Address: _____
From (Mo/Yr): _____ to _____ Job title: _____
Employment type: Full-time Part-time Average number of hours worked per week: _____
Starting pay: _____ Ending pay: _____
Supervisor's name and title: _____
Supervisor's phone number: _____
Responsibilities: _____

Reason for leaving: _____
May Willows Way, Inc. contact this employer for verification of information provided on this form?
Yes No Explanation, if applicable: _____

Employer: _____ Address: _____
From (Mo/Yr): _____ to _____ Job title: _____
Employment type: Full-time Part-time Average number of hours worked per week: _____
Starting pay: _____ Ending pay: _____
Supervisor's name and title: _____
Supervisor's phone number: _____
Responsibilities: _____

Reason for leaving: _____
May Willows Way, Inc. contact this employer for verification of information provided on this form?
Yes No Explanation, if applicable: _____

Employer: _____ Address: _____
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Starting pay: _____ Ending pay: _____
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Responsibilities: _____

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Yes No Explanation, if applicable: _____

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 Starting pay: _____ Ending pay: _____
 Supervisor's name and title: _____
 Supervisor's phone number: _____
 Responsibilities: _____

 Reason for leaving: _____
 May Willows Way, Inc. contact this employer for verification of information provided on this form?
 Yes No Explanation, if applicable: _____

Note: Additional work history and/or resume may be attached for consideration

Volunteer or Internship Experience:

Describe any volunteer or internship experiences you would like to share:

Education

Do you have a high school diploma or general equivalency diploma (GED)? Yes No

Name of School (Post Secondary/Vocational Training)	City and State	# Credit Hours Completed	Area(s) of Study	Type of Degree (e.g., A.S., B.S., M.S.)	Degree Received?
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>

Note: Copies of diplomas and/or educational transcripts or equivalent are required upon employment.

License/Certification (e.g., Mandt, CPR, First Aid, CNA, LPN, RN, etc.)

Relevant Licensure or Certifications

License/Certificate Issued by:	Skill/Field/Trade	License/Certificate Number	Date of Issue	Expiration Date

Note: Copies of licenses/certificates or equivalent may be required upon employment.

Applicant Statements

1. Discuss any personal or professional attributes you possess that might help you better perform the duties of the job you seek.

2. Describe any experience(s) you have had with people who have disabilities.

General Information

1. Please check computer/data entry skills in which you are proficient:

Typing Internet Use Word Processing Spreadsheet Applications
 Other: _____

2. Do you have a current valid driver's license? Yes No
a. If Yes, what class(es)? _____

3. Do you have reliable transportation including working seatbelts, working air conditioner/heat, vehicle in overall good, clean and safe condition and available to you for every shift you may work? Yes No

4. Do you have current active auto insurance? Yes No

5. Depending on your experience & prior training, you will be required to attend 40-80 hours of training within the first 3 months of employment at varying times.
Do you agree to this? Yes No
a. If No, explain: _____

6. If hired, when would you be available to begin working for Willows Way? _____

Background Verification

Are you listed on any employment disqualification lists i.e. Division of Health & Senior Services, Family Services (Child abuse/neglect), Department of Mental Health? Yes No

Have you ever been convicted of a crime? Yes No (A conviction record will not necessarily be a bar to employment, but facts such as history, Missouri law and funding entity requirements will be considered.)

If Yes, list each conviction with details including dates:

In the following space, please make us aware of any information on your driving record that may require explanation:

List all U.S. states in which you have resided: _____

References:

Each applicant must provide **three** individuals whom we may contact for a *professional* reference:

	Name	Company	Contact Info
1			Phone: _____ Fax: _____
2			Phone: _____ Fax: _____
3			Phone: _____ Fax: _____

To the best of my knowledge, the answers on this application are true and correct. I realize that falsification of any of the application information may be cause for (1) not being employed, or (2) termination, if hired. Failure to answer all of the requested information on this application may result in my not being considered for employment.

Signature of Applicant: _____ **Date:** _____

Applicant Availability

Please Note: Willows Way, Inc. provides continuous **24-hour support** to people with disabilities. Applicants seeking to work directly with individuals with disabilities may limit their opportunity for employment if they have limited availability, especially if seeking full-time employment.

Name: _____ Date: _____

Phone number(s): _____

Number of hours you wish to work per week: _____

During what time frames are you NOT available (i.e. Tuesday 6-9pm: I have school):

Sunday: _____

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Are you available for asleep overnight shifts? Yes No

Are you available for awake overnight shifts? Yes No

Additional availability information:

Authorization and Understanding of Background Screening

To the prospective employee/volunteer:

By this document, Willows Way, Inc. discloses to you that consumer reports about you will be obtained as part of the pre-employment/pre-volunteer process and may also be conducted at any time during your association with the Agency. The consumer reports may include but are not limited to a federal security check provided by E-Verify to confirm the identity and employment eligibility of all persons hired to work in the United States, an educational record screening, previous employment screening, a Division of Motor Vehicle screening, a criminal background check, a Family Care Safety Registry screening conducted by the Missouri DHSS which includes but is not limited to a criminal history screening, a Division of Family Services Child Abuse and Neglect screening, a Division of Health and Senior Services Employee Disqualification List screening, a Department of Mental Health Disqualification Registry screening. All employment/volunteer offers are contingent upon receiving satisfactory results from the above consumer reports. As a result, the employment/volunteer offer will be rescinded if any/all background screenings are unfavorable. Please note that it is the responsibility of all employees/volunteers to register with the Family Care Safety Registry within your first 15 days of employment. Failure to do so is a Class B Misdemeanor. Further information can be obtained from the Human Resources Department.

Prospective employee/volunteer statement:

I authorize Willows Way, Inc., its directors, employees, and agents to review the information contained in any/all consumer reports and in reports in connection with the pre-employment/pre-volunteering process. If hired, this authorization shall remain on file and shall serve as ongoing authorization for Willows Way, Inc. to procure consumer reports at any time during my association with the Agency. I understand that my employment/volunteer offer will be withdrawn if the results of any/all records and reports on me are not favorable.

Printed Name

Signature of Applicant

Date

Acknowledgement of Willows Way Employment Practices

**Willows Way, Inc. is an at-will equal opportunity employer,
in compliance with federal and state employment laws.**

Willows Way, Inc. shall not fail to hire, discharge, or discriminate among applicants for employment or employees in terms of compensation, terms, conditions, and privileges of employment because of race, color, religion, national origin, sex, disability status, or age. Reasonable accommodation shall be made for persons with disabilities who are applicants and employees capable of performing the essential duties of their positions. Willows Way, Inc. shall not limit, segregate, or classify applicants or employees so as to tend to, or to deprive, any applicant or employee of employment opportunity or adversely affect the employment opportunity of such persons.

Willows Way, Inc. adheres to the Federal government's policy of non-discrimination in the case of a citizen or intending citizen, because of his or her citizenship status. Willows Way, Inc. hires only United States citizens or lawfully authorized alien workers.

In consideration of my employment, I agree to conform to the rules and regulations of Willows Way, Inc., and my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Agency or myself. I understand that no supervisor or representative of Willows Way, Inc. other than the Executive Director of the Agency has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand that any employee manual or handbook which may be issued by the Agency shall not be construed as creating any form of employment agreement nor serve as an independent basis of contract for employment.

I have read and understand the information above.

Printed Name

Signature of Applicant

Date