



MURTIS TAYLOR HUMAN SERVICES SYSTEM
 13422 Kinsman Road, Cleveland, Ohio 44120

APPLICATION FOR EMPLOYMENT

DATE _____

NOTICE TO APPLICANTS: This application form is intended for use in evaluating your qualifications for employment. False or misleading statements during the interview and on this form are grounds for terminating the applicant process or, if discovered after employment, terminating employment. You may provide additional information on a separate sheet of paper. All qualified applicants will be considered without discrimination because of sex, marital status, race, age, national origin or the presence of disabilities. If you need assistance in completing this form due to a disability, please notify the Human Resources Department. Additional testing of job-related skills and drug testing may be required prior to employment. After an offer of employment, you may be required to submit to a medical examination.

NAME: LAST	FIRST	MIDDLE	OTHER NAMES USED (if any)	
ADDRESS: NUMBER	STREET	CITY	STATE	ZIP CODE
YOUR TELEPHONE NUMBER (S)		SOCIAL SECURITY NUMBER		
POSITION DESIRED:				
REFERRAL SOURCE:	<input type="checkbox"/> ADVERTISEMENT	<input type="checkbox"/> FRIEND	<input type="checkbox"/> RELATIVE	<input type="checkbox"/> WALK-IN
	<input type="checkbox"/> EMPLOYMENT AGENCY _____		<input type="checkbox"/> OTHER _____	
Is anyone related to you employed here at Murtis Taylor Human Services System? <input type="checkbox"/> YES <input type="checkbox"/> NO				
If yes, please give their name and relationship to you: _____				

Have you ever been employed with us before? Yes or No. If yes, give date and position below.

Are you prevented from lawfully becoming employed in this country because of VISA or Immigration Status? Yes or No
 Proof of citizenship or immigration status will be required upon employment.

Are you available to work: FULL-TIME PART-TIME TEMPORARY
 If part-time, what hours are you available? _____

Salary Requirement: Per Hour _____ Per Month _____ Per Year _____

Do you own an Ohio Driver's License? Yes No If necessary, can you use your car for work? Yes No

What is the year, make, and model of your car? _____
 Driver's License Number? _____ Expiration Date: _____

Have you ever served in the United States Military? Yes No

If yes, what branch? _____ Rank _____ Service Dates _____

Job(s) held: _____

EDUCATION - a transcript upon request must verify all education above a high school diploma.

Did you graduate from high school: Yes No - If "No", did you receive a GED? Yes No

What is the highest year of education completed? _____

Name and Address High School, College, University Attended	Major	Credit Hours Earned	Graduated Yes or No	Degree or Certificate Awarded

TRAINING AND OTHER QUALIFICATIONS

If applying for a clerical position: TYPING SPEED _____ SHORTHAND SPEED _____
WORD PROCESSING STROKES _____

Do you hold a professional license? Yes No
If yes, Type of License _____ Number _____ Expiration Date _____

If you have training in an area, which you feel is relevant to the position for which you are applying, please submit the following information (do not include training gained as part of your education as described above):

Type of Training	Organization	Length of Training	Subject(s) Covered

In the area below, please describe briefly any additional information or special qualifications you have for the position(s) requested. Include special machines or equipment you operate (e.g., personal computers, etc.):

EXPERIENCE - In the areas below, please print legibly or type past work experience beginning with the most recent employment. Attach extra sheets if necessary.

PRESENT OR MOST RECENT JOB:

Employer's Name and Address _____
 Length of Employment - From: Month _____ Year _____ To: Month _____ Year _____
 Reason for Leaving _____
 Position (Job Title) _____ Salary: Beginning _____ Ending _____
 Duties Performed _____

NEXT MOST RECENT JOB:

Employer's Name and Address _____
 Length of Employment - From: Month _____ Year _____ To: Month _____ Year _____
 Reason for Leaving _____
 Position (Job Title) _____ Salary: Beginning _____ Ending _____
 Duties Performed _____

Employer's Name and Address _____
 Length of Employment - From: Month _____ Year _____ To: Month _____ Year _____
 Reason for Leaving _____
 Position (Job Title) _____ Salary: Beginning _____ Ending _____
 Duties Performed _____

Employer's Name and Address _____
 Length of Employment - From: Month _____ Year _____ To: Month _____ Year _____
 Reason for Leaving _____
 Position (Job Title) _____ Salary: Beginning _____ Ending _____
 Duties Performed _____

EMPLOYMENT REFERENCES - Please list the names and addresses of individuals from at least three different places of employment that can verify your previous work experience. Use the back of this page if you need more space.

Name	Organization	Address	City/State/Zip Code	Phone Number	Business Relationship

Residency and Criminal Background Attestation

(Must be Completed and Signed Prior to Hire)

I, _____, hereby attest:

A. _____ that I have NOT been convicted of or pleaded guilty to a disqualifying offense under the jurisdiction of Ohio or any other similar jurisdiction of the United States. I further attest that I have not been convicted for any offense that has been expunged or sealed;

Or *(Initial only one A, if accurate, or B, if accurate, to attest)*

B. _____ that I have been convicted of or pleaded guilty to the following expunged or sealed offenses; however, I believe that these offenses are not disqualifying:

	Date of Conviction	Legal Description of Conviction (Inaccuracy will be treated as falsification)	Criminal Code Number of Conviction (Inaccuracy will be treated as falsification)
1			
2			
3			
4			

and *(Initial C to attest, if accurate)*

C. _____ I agree that I will notify my employer, Murtis Taylor Human Services System within fourteen (14) days if, while employed by MTHSS, I am formally charged with, am convicted of, pleaded guilty to a disqualifying offense. I understand that failure to make the notification may result in termination of employment;

and *(initial D to attest, if accurate)*

D. _____ I attest that I have been a resident of Ohio for the five (5)-year period immediately prior to the date upon which a criminal records check is requested. I understand that MTHSS may request that the bureau of criminal identification and investigation obtain information from the Federal Bureau of Investigation as part of the criminal records check.

and *(initial E to attest, if accurate)*

E. _____ To the best of my knowledge and belief, under penalty of perjury, I attest that I am eligible for a residential facility position. I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability.

Signature _____

Date _____

CRIMINAL CONVICTION DISCLOSURE

A criminal conviction will not necessarily disqualify an applicant from employment. Applications with incomplete responses in this section will be considered unresponsive and discarded without notification to the applicant. The applicant must provide accurate and truthful information in all sections of this document. Falsification of any information provided, either by commission or omission, is grounds for rejection of the application and or termination of employment. FBI and BCI background checks will be performed after a job offer is made.

Have you ever been convicted of a crime? Yes No. If all of your convictions were sealed (expunged), you may answer "no" to this question. If you answered yes, complete the table below for each conviction regardless of the date of the conviction. The burden of accuracy rests with the applicant. We highly recommend that you go to the jurisdiction(s) of your conviction(s) and secure a copy of your record. Disclosure of inaccuracies will be treated as a falsification.

Criminal Conviction Disclosure

	Date of Conviction	Legal Description of Conviction (Inaccuracy will be treated as falsification)	Criminal Code Number of Conviction (Inaccuracy will be treated as falsification)
1			
2			
3			
4			
5			
6			

Please Read Each Paragraph, then Sign Below

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure employment can be grounds for rejection of application or, if I am employed by Murtis Taylor Human Services System, terms for my immediate discharge from Murtis Taylor Human Services System.

I understand that if I am employed, my employment is at will and can be terminated at any time either with or without prior notice, by either myself or Murtis Taylor Human Services System.

I affirm that the answers I have made to all of the questions on this application are complete and true to the best of my knowledge and belief. I permit Murtis Taylor Human Services System to examine my references, record of employment, education record, social media, including the Internet, web logs or blogs, journal or diary, personal web site, social networking or affinity web site, web bulletin board or a chat room, as well as any other form of electronic communication, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out of or in any way related to such examination or revelation.

By typing your first name, last name and date in the fields below and submitting this form, you agree, acknowledge, certify, authorize, and attest regarding all contents this application.

Electronic Signature of Applicant _____ Date _____