CHILD ABUSE PREVENTION SERVICES

EMPLOYMENT APPLICATION 306 S 17th Ave Marshalltown, IA 50158 641-752-1730 www.capsonline.us

Personal Dat	<u>a</u>						
Name:							
	First Name	F	ull Middle N	ame	Last Nam	e	
Address:							
	Number and Street	City		Stat	e	Zip	
E-mail Addre	ss:						
Telephone N	umber:		Home	Cell	Work		
	Names, (i.e., Maiden) known by es, counties, states and zip code	-	-				
	County						
	County						
City	County		St	ate	ZI	0	
not limited to	er been convicted of a crime, or r b) operating a motor vehicle whi permanent U.S. work authorizat	le under the	influence	(OWI)? □Y	′es	er state, inc No No	luding (but
Position Appl	ied For:			Salary Expect	ed:	р	er hour/yea
Date Availabl	e for Employment:						
Education Da	ita	Datas	and and a deal				1
	Nome City and State of School	Dates	Attended	Degree /Dinlame	Maior	Minor	Cumulative
	Name, City and State of School	From	То	Degree/Diploma	Major	Minor	Cumulative

		Dates	, tetemaea				
	Name, City and State of School	From Mo/Yr	To Mo/Yr	Degree/Diploma Obtained	Major	Minor	Cumulative GPA
High School		N/A	N/A		N/A	N/A	
College, Technical, or Business							
Graduate School							
Other							

Are you presently enrolled in school? Yes No	If yes, where?	Day School
		Night School

Computer Experience

Indicate your relative level of computer expertise:	Don't use	Beginning	Proficient	Advanced
List software applications in which you are proficient:				

*Applicants will be expected to provide evidence/proof of eligibility for U.S. employment.

Employment: (Start with most recent employer and work backward. This section may not be substituted by a resume.)

Employer 1

Dates of Employment:	From	То
Name of Company:		
Street:		
City/State/Zip:		
Telephone:		
Position(s) You Held:		
Supervisor's Name and Title:		
Reason(s) for Leaving:		
Describe Your Responsibilities:		
May we contact this employer?	Yes No	If No, why not?

Employer 2

Dates of Employment:	From	То
Name of Company:		
Street:		
City/State/Zip:		
Telephone:		
Position(s) You Held:		
Supervisor's Name and Title:		
Reason(s) for Leaving:		
Describe Your Responsibilities:		
May we contact this employer?	Yes No	If No, why not?

Employer 3

Dates of Employment:	From	То
Name of Company:		
Street:		
City/State/Zip:		
Telephone:		
Position(s) You Held:		
Supervisor's Name and Title:		
Reason(s) for Leaving:		
Describe Your Responsibilities:		
May we contact this employer?	Yes No	If No, why not?

Other Accomplishments

Please list below any other job related accomplishments, professional distinctions, certifications, languages spoken other than English or verifiable volunteer work that Child Abuse Prevention Services should know about.

References: (Provide three business/school references only. List those individuals who were in a position to observe your performance. Do not list relatives or personal acquaintances.)

Reference 1	
Name and Title	
Company / School:	
Street:	
City, State, Zip:	
Telephone:	🗌 Home 🔛 Cell 🔛 Work
Email:	
Reference 2	
Name and Title	
Company / School:	
Street:	
City, State, Zip:	
Telephone:	🗌 Home 🔛 Cell 🔛 Work
Email:	
Reference 3	
Name and Title	
Company / School:	
Street:	
City, State, Zip:	
Telephone:	🗌 Home 🗌 Cell 🗌 Work
Email:	

Affirmation: (Please read carefully before signing.)

THIS APPLICATION REMAINS ACTIVE FOR A PERIOD NOT TO EXCEED 12 MONTHS.

I hereby affirm that all of my answers made in this application are true and correct. I understand that criminal history background checks and civil child abuse registry checks will be conducted on prospective candidates and I understand while I may be offered a position, final hire is contingent upon the results of these background checks. I understand that Child Abuse Prevention Services is an at-will employer and that my employment may be terminated at any time for any reason without previous notice.

The use of this application form does not indicate that there are any positions available, and in no way obligates Child Abuse Prevention Services.

Signature: _

Date:

THANK YOU! Please submit this application to: Child Abuse Prevention Services, 306 S 17th Ave, Marshalltown, IA 50158 or scan and email this application to caps@capsonline.us

Child Abuse Prevention Services is an Equal Opportunity Employer.

Applicants will be considered for the job opening applied for without regard to race, color, creed, national origin, sex, sexual orientation, gender identity, age, religion, political belief, physical or mental disability or veteran status.