

Moore Community House Early Head Start Application for Employment



Department:

It is our policy to fill vacancies with the best qualified candidate. We do not discriminate in hiring or employment procedures against an applicant regarding race, color, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status

Please Print

Position(s) Applied For:	Date of Application
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How Did You Learn About Us?
 Advertisement Friend Walk-In Employment Agency Relative Other

Last Name	Middle Name	First Name
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Address	Number	Street	City	State	Zip Code
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Telephone Number(s)	Alternative Number(s)
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Have you ever filed an application with us before	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	If yes, give date
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Have you ever been employed with us before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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	If yes, give date
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Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Proof of Citizenship/immigration status will be required upon employment

Are you available to work	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Both
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Are you currently on "lay off" status and subject to recall	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Can you travel if a job requires it	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you been convicted of a crime (felony or misdemeanor within the last seven years?)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Conviction will not necessarily disqualify an applicant from employment	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If yes, please explain

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Education

	Name and Address of School	Course of Study	Years Completed	Diploma or Degree
High School				
Undergraduate College.				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, job related skills and qualifications:

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities, or other protected status.

1. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate / Salary		
Job Title	Starting	Final	
Supervisor	Reason for Leaving		
2. Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/ Salary		
Job Title	Starting	Final	
Supervisor	Reason for Leaving		

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3. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)	Hourly Rate/ Salary		
Job Title	Starting	Final	
Supervisor	Reason for Leaving		

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: Note to applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job occupation is attached. Yes No

Are you able to perform all the essential job functions of the position without reasonable accommodations, and if not, what functions can't you perform? Yes No

Do you have a valid Mississippi State driver's license without an y motor vehicle violation during the past 18 months? Yes No

PROFESSIONAL REFERENCE

Please list Name, Address and Phone#

1.
2.
3.

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I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize contact with any prior or current employers unless specifically noted in writing.

I authorize the references I have provided, and any prior or current employers, to disclose any information related to my work history, performance, and experience without giving me any prior notice of each disclosure. I release the Employer from all claims, demands or liability arising out of or in any way related to obtaining such information about me or investigating any aspect of this employment application.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause, pending Board/ Policy Council approval if applicable. It is further understood that this "at will" employment relationship)not be changed by any written document or by conduct unless such a change is specifically acknowledged in writing by any authorized executive of this organization.

I swear that the information contained herein is true and complete to the best of my knowledge.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

Email Complete Applications for Teaching Positions and Floater Teacher Positions to:

mcrawford@moorecommunityhouse.org

Email Complete Applications for Kitchen Positions to:

kitchen@moorecommunityhouse.org