



**EMPLOYMENT HISTORY:**

List your last four (4) employers, assignments or volunteer activities, **starting with the most recent**, including military experience. Explain any gaps in employment in comments section below.

EMPLOYER TELEPHONE (      )	DATES EMPLOYED		Summarize the nature of the work performed and job responsibilities.
ADDRESS	START DATE	END DATE	
JOB TITLE	HOURLY RATE / SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HOURLY RATE FINAL		
MAY WE CONTACT FOR REFERENCES?    ___ YES    ___ NO    ___ LATER	\$	PER	
EMPLOYER TELEPHONE (      )	DATES EMPLOYED		
ADDRESS	START DATE	END DATE	
JOB TITLE	HOURLY RATE / SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HOURLY RATE FINAL		
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IMMEDIATE SUPERVISOR AND TITLE	\$	PER	
REASON FOR LEAVING	HOURLY RATE FINAL		
MAY WE CONTACT FOR REFERENCES?    ___ YES    ___ NO    ___ LATER	\$	PER	

Comments (including explanation of any gaps in employment)

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**OTHER INFORMATION:**

Last 4 numbers of your Social Security Number: \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No  
(Proof of citizenship or immigration status is required upon employment)

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As this agency serves people with developmental and intellectual disabilities, The State of NJ Department of Human Services requires employees to submit to fingerprinting and and a Child Abuse Record Information (CARI) check.

Have you ever been civilly or criminally liable of a crime against a person with a developmental/intellectual disability in the state of NJ?  Yes  No

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime?  Yes  No  
(answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation, and position applied for will be taken into account.)

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**AGREEMENTS:**

This serves as notice that The Arc of Salem County requires results of a satisfactory drug and alcohol screening test prior to beginning employment. Thereafter, tests will be performed on a random basis and will be conducted at a local medical site. Under the State of NJ Department of Health regulations, positive results for any controlled substance, illegal drug, or marijuana, even if medically prescribed, may preclude you from employment consideration and/or may result in immediate termination of employment. Signing below indicates the acknowledgement of this policy.

Some positions require completion of a confidential survey prior to consideration for a position. This survey is used as a tool and results will be used when determining if an applicant will continue to the interview process.

I give the Agency the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Agency and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information. It is understood and agreed that any misrepresentation by any in the application will be sufficient cause for cancellation of this application and/or termination from the company's service if I have been employed.

The Agency is an equal opportunity employer. The Agency does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only (90) days. At the conclusion of this time, if I have not heard from the Agency, and still wish to be considered for employment, it is necessary for me to fill out a new application.

By signing below, I understand and agree that The Arc of Salem County makes no representation that employment with the Agency is a guarantee of continued employment. I further understand that my employment will be on an at-will basis, and that neither I, nor the company, or its representatives have entered into a contract regarding the duration of my employment. Both The Arc and I are free to terminate my employment with The Arc of Salem County at any time, with or without cause or advanced notice. I further understand that no representative of the Agency has the authority to make or imply any assurances to the contrary.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_