

The
August Aichhorn Center
for
Adolescent Residential Care, Inc

23 West 106th Street, New York, New York 10025
www.aichhorn.org info@aichhorn.org

(212) 316-9353
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EMPLOYMENT APPLICATION

Application Date _____ Int. Date _____ Staff ID # _____

ALL PERSONS SHALL HAVE THE OPPORTUNITY TO BE CONSIDERED FOR EMPLOYMENT WITHOUT REGARD TO THEIR RACE, COLOR, RELIGION, NATIONAL ORIGIN OR ANCESTRY, AGE, DISABILITY, SEX, MARITAL STATUS, LIABILITY FOR SERVICE IN THE ARMED FORCES OF THE UNITED STATES, CITIZENSHIP, OR ANY OTHER CHARACTERISTIC PROTECTED BY APPLICABLE FEDERAL, STATE OR LOCAL LAWS.

Identifying Information

Last Name _____

First Name _____

Address _____ Apt. # _____

City _____ State _____ Zip Code _____

E-mail Address: _____

Home Telephone Number () _____

Business Telephone Number () _____

Social Security Number _____

If you are under 18 years of age, do you have a work permit? _____

Are you either a U.S. citizen or an alien who has the legal right to work in the job for which you are applying? _____

Pursuant to the Immigration Reform and control Act of 1986, all applicants, upon being made an offer of employment, must produce documents, which are specified by the Federal government, establishing their identity and authorization for employment in the United States. These documents must be produced no later than 72 hours after commencement of employment. You will also be required to sign Form I-9 (issued by the Federal government) verifying, under oath, your employment authorization.

Name _____

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Education and Employment History

(Please indicate highest grade or year of college completed)

High School _____

College _____

Post-graduate training (include school and degree)

Please list your employers since graduation, including name and address of the organization, dates worked, position or title, and supervisor's name. Also please indicate your salary for your present or latest job. (Continue on reverse side if necessary.)

Current occupational licenses, registrations, certifications (include expiration dates if applicable):

Related Accomplishments

What language(s) other than English do you speak and write? How well?

Have you had any experience with teenagers that are not reflected in your education/work history above?

Have you had any experience with the mentally ill that is not reflected in your education/work history above?

Have you had any experience with residential or criminal justice services that is not reflected in your education/work history above?

What special interests, hobbies or abilities do you have that you would be willing and able to share with teenagers (i.e. sewing, playing basketball, photography, jogging)?

Do you belong to any societies, organizations or clubs that are related to your professional or leisure interests?

Can you type? _____ If so, how many WPM? _____

Have you ever worked with computers? _____

If so, where and what did you do with them?

Personal Information

Some jobs at the Aichhorn Center require employees to restrain teenage boys and girls, as well as engage in other strenuous activities. If you are applying for such a position, does the general condition of your health permit this kind of activity? _____

Have you ever been convicted of a crime which has not been expunged or sealed by a court?

(A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe the nature of the crime and your subsequent rehabilitation).

Have you ever been reported to a child welfare agency for alleged abuse or neglect of a child? (If so, please explain. If you are offered employment we must clear your name through the New York State Child Abuse Registry).

You should be aware that the Aichhorn Center is a smoke - free environment, and smoking is not permitted on the job. Can you comply with this workplace rule? _____

Job Information

For what position(s) are you applying? _____

Do you prefer to work in our Brooklyn or Manhattan location? _____

How did you hear of this position? _____

Do you want to work full time? _____ (If not, how much time do you want?) _____

Are you available to work any day of the week? _____ What days do you prefer? _____

Are you available to work at any hours? _____ What hours do you prefer? _____

What salary (or range) are you seeking?

Would you be interested in a staff apartment if one were available? _____

When will you be available to begin work? _____

References

Please provide the name and addresses of three individuals outside your family who can offer us information about you personal and professional competence.

1. Name _____

Address _____

2. Name _____

Address _____

3. Name _____

Address _____

Comments

Is there anything else we should know about you personally, or about why you are applying for this job?

I have read and fully understand the questions asked in this application. I certify that all answers given by me are true, accurate and complete and understand that the omission and/or misrepresentation of any fact will be cause for immediate dismissal.

If hired, I agree to abide by all of the August Aichhorn Center's rules and regulations. I understand that my employment with the Center may be terminated with or without cause, and with or without notice, at any time, at the option of either the Center or me. I further understand that no representation, whether oral or written, by any representative or agent of the Center, at any time, can constitute a contract of employment. No representative or agent of the Center, other then an officer of the Center by written and mutually signed agreement, has the authority to enter into any agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit of other term or condition of employment, or to make any agreement contrary to the foregoing.

I hereby authorize the August Aichhorn Center to investigate and obtain copies of my record with my former employers and to contact references, and release the August Aichhorn Center and all informants from any liability whatsoever resulting from such an investigation.

I understand that the Americans with Disabilities Act of 1990 require employers to make reasonable accommodations to enable applicants with disabilities to apply for a job. If I require an accommodation in connection with the application process, I will not hesitate to ask.

APPLICANT'S SIGNATURE

DATE

[AC use]

Interviewer comments

Decision / Date _____

Start Date _____