



APPLICATION INSTRUCTIONS AND RELEASE

PLEASE READ AND SIGN BELOW

TO APPLICANT: READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS ON PAGE THREE (3). The Civil Rights Act of 1964 and the Americans with Disabilities Act (ADA) of 1990, as amended prohibits discrimination in employment because of race, color, creed, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age and citizenship. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status or physical or mental handicap or disability. The Fair Credit Reporting Act imposes restrictions with respect to credit data.

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way. If the employer decides to employ me, I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason. No one other than the President of Boys & Girls Homes of North Carolina, Inc. has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer of the Board of Trustees. This Company is hereby authorized to make any investigation of my personal history, financial and credit records through any investigative or credit agencies bureaus of your choice. This authorization includes making a driver's record check through the North Carolina Department of Motor Vehicles (or any state that you have had a drivers license) and a criminal state and federal investigation.

In making this application for employment, I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends and/or others. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report that is made. This application is being submitted for the sole purpose of my seeking regular employment for the stated position.

PLEASE PRINT NAME AND SIGN:

SIGNATURE OF APPLICANT

DATE

PREVIOUS EMPLOYERS

PLEASE NOTE: Your application will not be considered unless every question in this section is answered. Since we will make every effort to contact previous employers, the *correct telephone numbers of past employers are critical*. Ask for a phone book or call information if necessary.

MOST RECENT EMPLOYER

Yes No Are you currently working for this employer?

PHONE ()

COMPANY NAME

CITY

STATE

FROM TO

DATE EMPLOYED

JOB TITLE

SUPERVISOR NAME

DUTIES

SALARY PER (HOUR, WEEK, MONTH)

REASONS FOR LEAVING

SECOND MOST RECENT EMPLOYER

PHONE ()

COMPANY NAME

CITY

STATE

FROM TO

DATE EMPLOYED

JOB TITLE

SUPERVISOR NAME

DUTIES

SALARY PER (HOUR, WEEK, MONTH)

REASONS FOR LEAVING

THIRD MOST RECENT EMPLOYER

PHONE ()

COMPANY NAME

CITY

STATE

FROM TO

DATE EMPLOYED

JOB TITLE

SUPERVISOR NAME

DUTIES

SALARY PER (HOUR, WEEK, MONTH)

REASONS FOR LEAVING

FOURTH MOST RECENT EMPLOYER

PHONE ()

COMPANY NAME

CITY

STATE

FROM TO

DATE EMPLOYED

JOB TITLE

SUPERVISOR NAME

DUTIES

SALARY PER (HOUR, WEEK, MONTH)

REASONS FOR LEAVING

FIFTH MOST RECENT EMPLOYER

PHONE ()

COMPANY NAME

CITY

STATE

FROM TO

DATE EMPLOYED

JOB TITLE

SUPERVISOR NAME

DUTIES

SALARY PER (HOUR, WEEK, MONTH)

REASONS FOR LEAVING

EMPLOYMENT REFERENCES: Include only individuals familiar with your work ability. Do not include relatives.

NAME	EMAIL/ADDRESS/PHONE	RELATIONSHIP/ YEARS KNOWN
1.		
2.		
3.		

PERSONAL REFERENCES: Do not include relatives.

NAME	EMAIL/ADDRESS/PHONE	RELATIONSHIP/ YEARS KNOWN
1.		
2.		
3.		

EDUCATION:

NOTE: Do not fill out any part of this section you believe to be non job-related.

Please circle the highest grade completed. 7 8 9 10 11 12 13 14 15 16 16+

If your school records are under a different name than listed on page 1, please enter that name: _____

NAME	CITY/STATE	DATES	DEGREE	MAJOR
HIGH SCHOOL				
COLLEGE				
OTHER				

CERTIFICATION AND RELEASE

I certify that I have read and understand the applicant note on page one of this form and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this application, whether on this document or not, may result in rejections of my application or discharge at any time during my employment. I authorize Boys and Girls Homes of NC, Inc. and/or its agents, including consumer reporting bureaus, to verify any of this information. I authorize all former employers, persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release them from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

SIGNATURE	DATE
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STATEMENT OF PURPOSE

Please compose a statement including information on why you wish to be employed at Boys and Girls Homes of NC, Inc., your future goals; and how working at BGHNC would be beneficial to your pursuit of those goals. Your statement may be typed separately and attached with your application, or you may use the space provided below.

SPECIAL SKILLS

Please list any other skills, licenses or certificates that may be job-related or that you feel would be of value to this internship or organization.

CERTIFICATION AND RELEASE

I certify that I have read and understand the applicant note on page one of this form and that the answers given by me to the foregoing information, omissions or misrepresentations of facts called for in this application, whether on this document or not, may result in rejections of my application or discharge at any time during my internship. I authorize the company and/or its agents, including consumer reporting bureaus, to verify any of this information. I authorize all former employers, persons, schools, companies and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, companies and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during internship. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during internship.

SIGNATURE	DATE
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APPLICATION SUPPLEMENT -

The sentence completion form below and on the reverse side of this page is a valuable tool for assessing your ability to deal with our clients.

Working with our residents requires a great deal of knowledge and understanding of emotional development. Terms and techniques are important, however, a good understanding of one's self is a pre-requisite to helping others. If you should join our staff and share with us the responsibility for the emotional growth of these youth, you will want to be sure that together we have selected you wisely and that we have confidence in your strengths and your abilities.

Please read over each statement below. Make each one into a complete sentence, using any thought or idea which comes to mind. It is not necessary to think them through carefully, since we will not be looking for the "right" answers. We are interested only in understanding you better, in relation to the position for which you are applying. Use the back side of this form if you need more space for your responses.

1. An emotionally disturbed youth _____

2. Discipline means _____

3. A youth who talks back _____

4. Our most valuable gift to other people _____

5. My weakest ability _____

6. A good supervisor _____

7. When I see aggression _____

8. I want to work with children because _____

9. Describe a time when you tried to persuade a person or a group to do something they did not want to do _____

10. Write about a stressful situation you have experienced. _____

11. Describe a time when you had trouble seeing eye to eye or agreeing with a co-worker. How did you handle it? _____

12. List an example of when you worked as a member of a team to complete a project. _____

13. Describe a time when you were faced with a very difficult decision to make and describe what you did and how it turned out. _____

SIGNATURE	DATE
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Boys and Girls Homes of North Carolina, Inc.

400 Flemington Drive

Post Office Box 127

Lake Waccamaw, North Carolina 28450

Physical Job Safety Analysis (JSA)

-Application-

This information is specific to the physical requirements for the safe performance of specific positions. Please sign only and return this form with your application. Thank you!

Employee Information

Today's Date: _____ / ____ / 20____

SS# _____

Employee Name: _____

Job Title: _____

Major Physical Job Responsibilities:

(Includes activities i.e. lifting, carrying, walking distance, surface, stairs, repetitive motions, etc.)

- 1. Instruct troubled youth
2. Ability to stand, walk and sit
3. Adequate ability to see and hear
4. Supervise youth & provide for physical safety
5. Cognitive skills necessary to make decisions
6. Participate in disciplinary procedures/restraints

Body Movements - Physical Requirements

(Based on total hours in a typical 8-10 hour)

All Numbers Represent Approximate Hrs.

Table with columns for Physical Client (Sports, Restraints, Other) and Push (push 1-10, 11-25, 26-50, 50+). Rows include Bend at Waist, Twist Upper Body, Kneel, Walk Uneven, Climb Stairs/Ladder, Reach over.

Repetitive Use of Hands for...

Table with columns for Lift (lbs.) and Pull (lbs.). Rows include Squeezing, Keyboarding, Tool Use.

Endurance:

Table with columns for Carry (Carry 1-10, 11-25, 26-50, 50+). Rows include Sit, Stand, Walk.

Time Spent Working:

Table with rows for Indoors and Outdoors, both with a value of 1-3.

Signature of Applicant

*Verification that applicant meets the Listed requirements

OTHER INFORMATION

Supervises all aspects of cottage activities for troubled youth in treatment. May be involved in physical restraint situations when needed. Workers must have physical, visual, verbal and cognitive abilities to ensure the safety of youth and co-workers.

Please use this page if you need additional room for any response. Be sure to note the question or section for which additional space was needed.

Quick Investigations, Inc.

**AUTHORIZATION
FOR
BACKGROUND INVESTIGATION**

To Whom It May Concern:

I, _____, hereby authorize Quick Investigations, Inc. and/or its' agents to make an independent investigation of my background in connection with an application of employment with Boys & Girls Homes of NC, Inc.

I authorize and request any present or former employer, school, police department, court records, including those maintained by both public and private organizations, financial institution or other persons having personal knowledge about me to furnish Quick Investigations, Inc. with any and all information in their possession regarding me for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and I specifically waive any written notice from any present or former employer who may provide information based upon this authorization request.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Print **Full** Name: _____

Print **Maiden Name** or **Other Last Names** Previously Used: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth (for I.D. purposes only): _____ / _____ / _____

Social Security Number: _____ - _____ - _____

Driver's License Number: _____ State of Issue: _____

Previous Addresses (past 7 years):	Dates:
_____	_____
_____	_____
_____	_____
_____	_____

Signature: _____ Date: _____ / _____ / _____

SUBMIT YOUR APPLICATION