

APPLICATION FOR EMPLOYMENT

Domestic Violence Services is an Equal Opportunity Employer Opportunity for employment will be based solely on the merit of the applicant

POB 152 Pendleton, Oregon 97801 Telephone (541) 276-3322 FAX (541) 276-8958 www.domesticviolenceservices-or.org	
Date of Ap	oplication
Position Applied For	
Referral Source:	
Employment Agency Other	
Name	
Last First	Middle
Address Number Street City State	Zip Code
Telephone () Personal Social Security Number Area Code	(Optional)
Have you filed an application here before? Yes No If Yes, give date	
Have you ever been employed here before? Yes No If Yes, give date	
Are you employed now?	
May we contact your present employer?	
Are you prevented from lawfully becoming employed in this country because of Visa or Immig (Proof of citizenship or immigration status will be required upon employment.)	gration Status? 🗌 Yes 🗌 No
On what date would you be available to start work?	
Are you available to work	prary
Are you on a lay-off and subject to recall?	
Can you travel if a job requires it?	
Languages spoken:	
For languages other than English - Fluent? Read?Write?	

EDUCATION AND FORMAL TRAINING

Do you have a high school diploma or a GED Certificate?		Yes		No
List enough education to meet the requirements specified in th	ne r	ecruitir	ng	announcement.

NAME AND LOCATION	MAJOR COURSE OF STUDY	DATES ATTENDED	CREDITS EARNED Sem hrs(FULL OR PART TIME	GRADUATED Yes/No	DEGREE EARNED AND YEAR

WORK EXPERIENCE

List your current or most recent employer first, then list all your jobs for the last 10 years (including volunteer, if desired). You may wish to include qualifying experience gained more than 10 years ago if it helps you to meet the requirements shown in the recruiting announcement. **Resumes will not substitute for completing the WORK EXPERIENCE section**. If you need more space to describe duties, you may attach additional sheets. If you are describing additional jobs, provide information in the same format as below.

Current or Last Employer	Kind of Business
Address (Including City & State)	
Supervisor's Name and Telephone	Your Job Title
If you supervised employees, indicate your responsibility by checking the appropriate box(es):	Hired or recommended hiring Assigned and reviewed work Rated work performance Handled disciplinary problems
Indicate number of employees and job types supervised:	
AVERAGE HOURS WORKED PER WEEK:	TOTAL TIME YearsMonths FROM MonthYear TO MonthYear
DUTIES: (Be specific):	
Reason for Leaving	
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or Veteran's hiring preference, you must attach a copy of your DD214/DD215 to this application) o you have a valid Vehicle Operator License Yes No Yes, State of IssueType or Class License No st professional, trade, business or civic activities and offices held: our may exclude those which indicate race, color, religion, sex or national origin.) Professional References (Name) (Phone #) (Address) (Name) (Phone #) (Address)	immanze special skills and qualification	is acquired from employment	or other experience.	
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his application for employment shall be considered active for the period of time that the position is open. Any appli	(Name)	(Phone #) (Phone #)	(Address) (Address)	
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Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I understand that false or misleading information provided in my application, interview(s) or at any time during the employment process, whether verbal or written and whether made by me or by others at my request, will result in rejection of my application, denial of employment, or dismissal from service if discovered after employment, and in some circumstances, may result in criminal prosecution.

I understand that, if hired, I must prove that I am legally authorized to work in the United States. I hereby authorize Domestic Violence Services to check employment references and verify education information provided herein and as disclosed in the interview process. I understand that I will be asked to submit to a pre-employment drug test, criminal history background check as a condition of employment. I release Domestic Violence Services and all providers of information from any liability as a result of furnishing and receiving any information related to the hiring process.

Signature of Applicant

Date