

PLEASE PRINT ALL INFORMATION
REQUESTED EXCEPT SIGNATURE

HESED HOUSE, INC.
APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR
ILLEGAL DRUGS or IMPROPER USE OF
PRESCRIPTION DRUGS

PLEASE COMPLETE ALL PAGES

DATE _____

Name _____
Last First Middle Maiden

Present Address: _____
Number Street City State Zip

Home Telephone Number: _____ Alternate/Cell Number: _____

Have you had any traffic accidents during the past three years? How many? _____

Have you had any moving violations during the past three years? How many? _____

If under age 18, please list age: _____ How long have you lived at the above address? _____

Are you eligible for employment in the U.S.A? Yes ___ No ___ (If yes, verification will be required upon employment)

Conviction of a crime will not be an absolute bar to employment.

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ___ No ___ Yes If "Yes", explain
number of conviction(s), nature of offenses (leading to conviction(s)), how recently such offense(s) was/were
committed, sentence(s) imposed, and type(s) of rehabilitation: _____

MILITARY

Have you ever been in the Armed Forces? ___ Yes ___ No Are you a member of the National Guard? ___ Yes ___ No

Specialty _____ Date Entered _____ Discharge Date _____

Position applying for (must identify a current open position): _____

Salary desired (be specific): \$ _____ Days/hours available to work: No Preference _____

How many hours can you work weekly: _____

Monday _____ Thursday _____

Tuesday _____ Friday _____

Wednesday _____ Saturday _____

Sunday _____

Employment Desired: _____ FULL-TIME ONLY _____ PART-TIME ONLY _____ FULL-OR
PART-TIME

Were you previously employed by PADS/Hesed House? _____ If yes, when? _____

If application is considered favorably, on what date will you be available to start work? _____

FOR OFFICE USE ONLY

Ministry _____ Rate _____

Position _____ Start Date _____

FOR OFFICE USE ONLY

Interviewed By: _____ Date: _____

Interviewed By: _____ Date: _____

Interview Summary(ies):

Tested By: _____ Date: _____

Letter Composition and Typing:

____ Yes
____ No
____ Time/WPM

Mathematics:

____ Yes
____ No
____ Results

Filing:

____ Yes
____ No
____ Results

Spelling:

____ Yes
____ No
____ Results

FOR OFFICE USE ONLY

REFERENCE CHECK RESULTS

1. _____
2. _____
3. _____

Notes: