

1321 Stine Road, Bakersfield, CA 93309 661-396-2301 661-396-2349 (fax) Employment Application

05092007

An Equal Opportunity Employer				
Please Print				
Date Last Name	First Name		Middle	
Present Address				
No. & Street	City	State	Zip	
Mailing Address (if different from present add	ress)			
No. & Street	City	State	Zip -	
Business Phone Home Phone	Cell Phone	Em	ail	
Employment Desired				
Position applying for:				
Are you applying for:				
Regular full-time work?				
Regular part-time work?				
Temporary work, e.g., summer or ho	liday work?			
What days and hours are you available for wor	rk?			
If applying for temporary work, during what p				
From: T	o:			
Are you available for work on weekends?				
Would you be available to work overtime, if necessary?				
If hired, on what date can you start work?				
Salary desired:				

Personal Information

Have you ever applied to or worked for Kern Bridges Youth Homes, Inc. (H	KBYH) before? 🗌 Yes	□No
If yes, when?		
Do you have any friends or relatives working for KBYH? If yes, state name(s) and relationship:	Yes	□No
Name	Relationship	-
Name Why are you applying for work at KBYH?	Relationship	-
If hired, would you have a reliable means of transportation to and from wor	rk? 🗆 Yes	□No
Are you at least 21 years old? (If under 21, hire is subject to verification that minimum legal age.)	at you are of Yes	□No
If hired, can you present evidence of your U.S. citizenship or proof of your and work in this country?		□No
Are you able to perform the essential functions of the job for which you are with or without reasonable accommodation?	applying, either	□No
If no, describe the functions that cannot be performed.		
(Note: We comply with the ADA and consider reasonable accommodation measures th perform essential functions. Hire may be subject to passing a medical examination, and	at may be necessary for eligible app to skill and agility tests.)	licants/employees to
Have you ever been convicted of a criminal offense (felony or serious misd marijuana-related offenses that are more than two years old need not be list		□No
If yes, state nature of the crime(s), when and where convicted, and dis	sposition of the case.	
(Note: No applicant will be denied employment solely on the grounds of conviction of offense, the surrounding circumstances and the relevance of the offense to the position(dependent upon an exemption received from California State Licensing)		
Are you currently employed?	🔲 Yes	□No
If so, may we contact your current employer?	Yes	□ No

Education, Training, and Experience

School	Name and Address				No. of Years Completed	Did you Graduate?	Degree or Diploma
High School	Name					☐ Yes ☐ No	
	Address						
	City	State	Zip				
College/ University	Name					☐ Yes ☐ No	
Oniversity	Address						
	City	State	Zip				
Vocational/						☐ Yes ☐ No	
Business	Name						
	Address						
	City	State	Zip				
Health Care Training	Name			·		Yes No	
	Address						
	City	State	Zip				
work at Ke	e any other experience	e, training, qu	ıalifications	s, or skill	s that you feel	make you especi	ally suited for Yes No
If so,	please explain:						- <u></u>

Answer the following questions if you are app	
	r?
	Issuing state:
Has your license/certification ever been revoked If yes, state reason(s), date of revocation or	d or suspended?
Employment History	
	ting with your most recent employer (last five years is sufficient) must complete this section even if attaching a resume.
	() -
Name of Employer	Telephone No.
Type of Business	Your Supervisor's Name
Address & Street	City State Zip
Dates of Employments	Weekly Pay:
From To	Starting Ending
Your Position and Duties	· · · · · · · · · · · · · · · · · · ·
Reason for Leaving	
May we contact this employer for a reference? .	Yes No
	() -
Name of Employer	Telephone No.
Type of Business	Your Supervisor's Name
Address & Street	City State Zip
Dates of Employment: From To	Weekly Pay: Ending
Your Position and Duties	
Reason for Leaving	

Employment History, continued

	() -			
Name of Employer	Telephone No.	_		
				_
Type of Business	Your Supervisor's Name			
Address & Street	City	State		
Dates of Employment:	Weekly Pay		- -r	
From To		Starting	Ending	
Your Position and Duties				
Your Position and Duties				
Reason for Leaving				
May we contact this employer for a reference?	•••••	•••••	🗌 Yes 🔲 No	
				
Name of Employer	Telephone No.	-		
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Type of Business	Your Supervisor's Name			-
				
Address & Street	City	State	Zip	
Dates of Employment: From To	Weekly Pay		Ending	
From To		Starting	Enging	
Your Position and Duties				
Reason for Leaving				
May we contact this employer for a reference?		•••••	Yes No	
	() -			
Name of Employer	Telephone No.	-		
				_
Type of Business	Your Supervisor's Name			
Address & Street	City	State		
Dates of Employment:	Weekly Pa			
From To	Weekly I d	Starting	Ending	
Your Position and Duties				
Reason for Leaving				
May we contact this employer for a reference?			🔲 Yes 🔲 No	

Military Service					
Have you obtained any	special skills or abilities	as the result of ser	vice in the military?	? . 🔲 Yes	□ No
If so, describe:					
					
_					
References					
List below three persons	s not related to you who	have knowledge o	f your work perform	nance with	in the last three years.
First Name	Last Name				
That Name	Last Name		relephone No.		
Address & Street		City	State	Zip	
Occupation		No. of Years Acquainted			
			()		
First Name	Last Name		Telephone No.		
Address & Street		City	State	Zip	<u></u>
Occupation		No. of Years Acquainted			
			() -		
First Name	Last Name		Telephone No.		
Address & Street		City	State	Zip	<u>-</u>
Occupation		No. of Years Acquainted			

Please Read Carefully, Initial Each Paragraph and Sign Below

Initials

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials

I hereby authorize KBYH to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to KBYH any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release KBYH, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and KBYH. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or KBYH, and that no promises or representations contrary to the foregoing are binding on KBYH unless made in writing and signed by me and KBYH's designated representative.

Initials

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by Kern Bridges Youth Homes, I am entitled to copies of any such public records obtained by KBYH unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

Initials

Equal Employment Opportunity

In order to provide equal employment and advancement opportunities to all individuals, employment decisions at KBYH will be based on merit, qualifications, and abilities. KBYH does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, national origin, age, disability, or any other characteristic protected by law.

KBYH will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in an undue hardship. This policy governs all aspects of employment, including selection, job assignment, compensation, discipline, termination, and access to benefits and training.

Any employees with questions or concerns about any type of discrimination in the workplace are encouraged to bring these issues to the attention of their immediate supervisor or the Personnel Director. Employees can raise concerns and make reports without fear of reprisal. Anyone found to be engaging in any type of unlawful discrimination will be subject to disciplinary action, up to and including termination of employment.

 Initials	Statement of At-Will Employment
iniuais	Employment at Kern Bridges Youth Homes (KBYH) is employment at-will. Employment at-will may be terminated with or without cause and with or without notice at any time by the employee or KBYH. Nothing on this application or in any document or statement shall limit the right to terminate employment at-will. No supervisor or employee of KBYH has any authority to enter into an agreement for employment for any specified period of time or to make an agreement for employment other than at-will. Only the Executive Director of KBYH has the authority to make any such agreement and then only in writing.
Date	Applicant's Signature

Print Name