

Application for Employment

We are an Equal Opportunity Employer

"Committed to improving our communities...one life at a time"

APPLICANT IN	FORMATION										
Last Name:	First Name:			M	I:	Date:					
Address (Street, City, State,	, Zip Code):										
Phone Number:	Alternate Phone Number:			Email Address:							
POSITION INFO	ORMATION	<u>'</u>				•					
Position(s) applying for:	May we refer your application within the agency for other positions for which you may qualify?			Availa	Available start date:						
1. 2.		Yes No									
Have you been employed by	No Are you available to work:			:							
If yes, list dates:	Full-Time			P	art-Tim	e					
Are you related to anyone of	currently employed by Bell-Whi	tley Comm	nunity Action Ager	ncy OR	currently serving or	n the Bo	oard of I	Directors	or Policy Co	ıncil?	
Yes No											
If yes, list name and relation	nship:										
Are you currently employed	1? Yes No		If yes, may we con	ntact you	ir present employer	r?	Yes		No		
Are you authorized to work	in the United States?	Yes	No								
If employed, you must shov	v documentation that proves yo	ur identity	and employment	eligibilit	y.						
Do you have a valid driver' Yes No			ve a reliable means Yes N		sportation?		Ava	ailable to	travel?	Yes	No
How did you find out about	this job opening?										
BWCAA Website	BWCAA Employee	Friend	or Relative	Walk-	in Emplo	yment 1	Agency		Facebook	Other	
EDUCATION											
	Name and Location of School		Number of Years Completed Diploma, Degr		ree, or Certificate		cate	Course of Study			
High School											
College/University											
Other											
Other											
List Professional, trade, bus orientation, political affiliat	iness or civic activities and officion or belief.)	ces held. (E	Exclude those that i	ndicate	race, color, religion	n, gende	er, nation	nal origin	ı, age, handica	ap, marital stat	us, sexual

EMPLOYMENT HISTORY	7					
Dates Employed (Month/Year):	Position Title:					
to						
Salary	Organization Name and Address (city, state):					
Start: \$ Final:\$						
Full-time Part-time						
May we contact this employer for references? Yes No	Supervisor's Name/Title: Supervisor's Phone number:					
Duties:						
Reason for leaving:						
EMPLOYMENT HISTORY	7					
Dates Employed (Month/Year):	Position Title:					
to						
Salary	Organization Name and Address (city, state):					
Start: \$ Final:\$						
Full-time Part-time						
May we contact this employer for references? Yes No	Supervisor's Name/Title:	Supervisor's Phone number:				
Duties:						
Reason for leaving:						
icason for leaving.						
EMPLOYMENT HISTORY	7					
	Position Title:					
EMPLOYMENT HISTORY						
EMPLOYMENT HISTORY Dates Employed (Month/Year):						
EMPLOYMENT HISTORY Dates Employed (Month/Year): to	Position Title:					
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary	Position Title:					
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$	Position Title:	Supervisor's Phone number:				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for	Position Title: Organization Name and Address (city, state):	Supervisor's Phone number:				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No	Position Title: Organization Name and Address (city, state):	Supervisor's Phone number:				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No Duties:	Position Title: Organization Name and Address (city, state):	Supervisor's Phone number:				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No Duties: Reason for leaving:	Position Title: Organization Name and Address (city, state): Supervisor's Name/Title:	Supervisor's Phone number: e Employment History section above. Please do not list anyone related				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No Duties: Reason for leaving: REFERENCES Please list at least three professional of	Position Title: Organization Name and Address (city, state): Supervisor's Name/Title:					
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No Duties: Reason for leaving: REFERENCES Please list at least three professional of to you.	Position Title: Organization Name and Address (city, state): Supervisor's Name/Title: or personal references. Please do not list any references included in the	e Employment History section above. Please do not list anyone related				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No Duties: Reason for leaving: REFERENCES Please list at least three professional of to you.	Position Title: Organization Name and Address (city, state): Supervisor's Name/Title: or personal references. Please do not list any references included in the	e Employment History section above. Please do not list anyone related				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No Duties: Reason for leaving: REFERENCES Please list at least three professional of to you.	Position Title: Organization Name and Address (city, state): Supervisor's Name/Title: or personal references. Please do not list any references included in the	e Employment History section above. Please do not list anyone related				
EMPLOYMENT HISTORY Dates Employed (Month/Year): to Salary Start: \$ Final:\$ Full-time Part-time May we contact this employer for references? Yes No Duties: Reason for leaving: REFERENCES Please list at least three professional of to you.	Position Title: Organization Name and Address (city, state): Supervisor's Name/Title: or personal references. Please do not list any references included in the	e Employment History section above. Please do not list anyone related				

Have you ever been convicted of violating any law (omit minor traffic violations)?	Yes	No	
If yes, list conviction(s), date(s), and place(s). Conviction is not an automatic rejection.			
			 _
			 -
Agreement			

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in the application for employment as may be necessary to make an employment decision. I further authorize my former employers, and other references listed herein to furnish information regarding my performance, work habits, and such other information as Bell-Whitley CAA, Inc. may require in considering my application for employment. I agree that agency business needs may vary and agree that the following may be necessary: additional work time, rotating work schedule, a work schedule other than Monday through Friday.

I understand that my inclusion of false or misleading information on this application may be grounds for immediate dismissal from employment when discovered without regard to the length of my employment. I understand this application is not and is not intended to be a contract of employment. There is no guarantee of a job offer or job interview in completing this application blank. I further acknowledge that if hired, I will be an "at-will" employee. I agree and understand that the agency is an "employment at will" employer, and as such, my employment is for an indefinite period of time and that the agency can change wages, benefits, and conditions at any time. Bell-Whitley CAA, Inc. is an equal opportunity provider and employer dedicated to respecting and promoting the unique identity of each client, child and family and will refrain from stereotyping on the basis of gender, race, ethnicity, sexual orientation, culture, religion or disability and I acknowledge that if hired I will abide by these standards of conduct. Due to the large number of applications received by Bell-Whitley CAA, Inc. and the competitive nature of the employment process, specific reason for employment decisions will not be released.

In completing the application blank, applicant may be subject to the following pre-employment checks: employment reference checks from former employers, criminal records check, central registry check, drug screening, physical examination, tb risk assessment, etc.

(Applicant's Signature)	(Printed Name of Applicant)	(Date)

Applications may be mailed, emailed, or personally delivered to our Pineville or Williamsburg offices. Please see below for contact information.

Mailing: PO Box 159, Pineville, KY 40977 or PO Box 427, Williamsburg, KY 40769 Physical: 129 North Pine Street, Pineville, KY 40977 or 215 North 4th Street, Williamsburg, KY 40769 Email: jobs@bellwhitley.com Phone: (606)337-3044 or (606)549-3933

This project is funded in part under a contract with the Cabinet for Health and Family Services with funds from the Community Services Block Grant Act of the United States Department of Health and Human Services and funds from Workforce Development Cabinet, Office of Training and Re-employment and the Eastern Kentucky C.E.P., Inc. with funds from the United States Department of Labor, Workforce Investment Act of 1998.