

ACHIEVE Human Services, Inc.



3250-A East 40th Street, Yuma, AZ 85365
Phone: (928) 341-0335 Fax: (928) 341-9462

OUR MISSION STATEMENT:

“Empower the individuals that we serve to live their lives to their greatest potential.”

EMPLOYMENT APPLICATION

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE FILLING OUT THE APPLICATION FOR EMPLOYMENT

All requested information must be furnished. All information you provide will determine your eligibility for the position.

If any item does not apply to you, write “N/A” for Not Applicable. Note, for completing “Employment History”: Fill in ALL spaces accurately and completely. Include all related work experience, including volunteer and military. All new employees are required to produce documentation verifying their eligibility for employment in the United States at the time they are hired pursuant to Federal Law.

ACHIEVE Human Services, Inc. IS AN EQUAL OPPORTUNITY EMPLOYER
Women, Veterans and individuals with disabilities are encouraged to apply

INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED

POSITION APPLYING FOR: _____

I will accept: PERMANENT TEMPORARY SHIFT

Check all that apply: Full-Time Full-Time Days

Part-Time Part-Time Nights

Several of our government contracts require that our employee's be able to speak, read and write the English language.

8. Are you proficient in the English Language? Yes _____ No _____

Speak Read Write

9. Please check all areas in which you are proficient:

Yes	Software	Version
	Microsoft Word	
	Microsoft Excel	
	Microsoft Access	
	Microsoft Office	
	Adobe Acrobat Reader	
	Internet	
	Other	

Yes	Office Machines	Speed (if applicable)
	Typing	
	10-Key by touch	
	Copiers	
	Fax	
	Calculator	
	TDD	
	Multi-Line Phone	
	Mail Postage Machine	
	Other	

How did you learn about this position?

- A. State Employment Office
- B. Bulletin Board
- C. Newspaper
- D. ACHIEVE Human Services, Inc. Website
- E. Internet
- F. Radio
- G. Current Employee
- H. Other _____

SECTION C: EMPLOYMENT HISTORY
TYPE OR PRINT CLEARLY

Begin with your present employment and work back. Account for all time during the past 10 years. Include additional pages if necessary. **IF YOU PROVIDE A RESUME, YOU MUST INCLUDE ALL THE INFORMATION REQUESTED IN SECTION 'C' OF THE APPLICATION FOR EACH EMPLOYER, IN THE SAME FORMAT.**

Employer: _____ Title: _____

Address: _____ From: ____/____/____ To: ____/____/____
MM DD YY MM DD YY
Total: Years _____ Months _____

Phone Number: _____ Hours/Week: _____ Part-Time ____ Full-Time _____

Supervisor's Name and Title: _____

Why did you leave? _____

May we contact employer? Yes No Number of people directly supervised: _____

DESCRIBE YOUR DUTIES PERFORMED IN THAT POSITION, **DO NOT STATE "SEE RESUME"**

Employer: _____ Title: _____

Address: _____ From: ____/____/____ To: ____/____/____
MM DD YY MM DD YY
Total: Years _____ Months _____

Phone Number: _____ Hours/Week: _____ Part-Time ____ Full-Time _____

Supervisor's Name and Title: _____

Why did you leave? _____

May we contact employer? Yes No Number of people directly supervised: _____

DESCRIBE YOUR DUTIES PERFORMED IN THAT POSITION, **DO NOT STATE "SEE RESUME"**

SECTION C: EMPLOYMENT HISTORY CONTINUED
TYPE OR PRINT CLEARLY

Employer: _____ Title: _____

Address: _____ From: ____/____/____ To: ____/____/____
MM DD YY MM DD YY
Total: Years _____ Months _____

Phone Number: _____ Hours/Week: _____ Part-Time ____ Full-Time _____

Supervisor's Name and Title: _____

Why did you leave? _____

May we contact employer? Yes No Number of people directly supervised: _____

DESCRIBE YOUR DUTIES PERFORMED IN THAT POSITION, **DO NOT STATE "SEE RESUME"**

Employer: _____ Title: _____

Address: _____ From: ____/____/____ To: ____/____/____
MM DD YY MM DD YY
Total: Years _____ Months _____

Phone Number: _____ Hours/Week: _____ Part-Time ____ Full-Time _____

Supervisor's Name and Title: _____

Why did you leave? _____

May we contact employer? Yes No Number of people directly supervised: _____

DESCRIBE YOUR DUTIES PERFORMED IN THAT POSITION, **DO NOT STATE "SEE RESUME"**

REFERNCES

Please provide two references other than a relative

Name	Position	Company	Telephone
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1. _____

2. _____

SECTION D: IDENTIFICATION

A Three-Year Driving Record Report will be required from DMV on all applicants applying for positions in which driving an Agency vehicle is an essential function of the job.

Do you have a valid Driver’s License: Yes No If Yes, Provide:

License #: _____ Class: _____ State: _____

An Extensive Background check will be completed on all applicants applying for contract positions with the Department of Homeland Security and/or United States Border Patrol.

Have you ever been convicted of a Felony? Yes No

Convictions are evaluated in relation to job position and will not necessarily preclude employment.

If Yes, Provide: Date: _____ City: _____ State: _____

Nature of Offense: _____

SECTION E: CERTIFICATE OF APPLICANT

I, hereby, certify that the facts contained in this application are true, accurate and complete. I understand that any omissions or falsified statements on this application may be cause for disqualification for employment with ACHIEVE Human Services, Inc., or my dismissal. I, hereby, authorize ACHIEVE Human Services, Inc. to verify the accuracy of all statements contained in this application, resume, and any references and employers listed. I also authorize the employers/references listed to provide ACHIEVE Human Services, Inc. with all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damages that may result from furnishing such information.

“I further understand that, if employed in a grant funded position, my continued employment is contingent upon availability of funds and any position will be abolished when the grant expires unless alternate funding is secured.”

Applicant’s Signature

Date

SECTION F: Equal Employment Opportunity Information

- In order to study our recruitment methods for fairness and effectiveness and to comply with federal guidelines, we request the following information below.
- The information will be kept **confidential** and will be used only for data tabulation purposes.
- **Completion of this information is optional. Failure to provide the following information will not subject you to any adverse treatment.**

Position Applied For: _____ Date: _____

ACHIEVE Human Services, Inc. is a non-profit organization that establishes Government contracts to employ individuals with disabilities.

Do you have a disability? Yes _____ No _____

Has this disability adversely impacted your ability to obtain and/or maintain employment?

Yes _____ No _____

Check One	Ethnic Category
	Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
	White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
	Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.
	Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
	Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
	American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
	Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.

Please check one: Female: _____ Male: _____

Over 40 years of age: _____ Under 40 years of age: _____

Human Resources Use Only: Meets Min. Qualifications: Yes ___ No ___, Incomplete Application ___, Lacks Experience ___, Lacks Education ___, Received Late ___, Will Interview ___, HR Initials _____

Last Revised: 05/11