

WABASH AREA DEVELOPMENT, INC. (WADI)

Employment Application

110 Latham Street, PO Box 70, Enfield IL 62835

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WADI offers equal opportunities to all persons, avoiding discrimination either in the hiring process or in employment opportunities on the basis of race, color, ancestry, religion, disability, age, sex, national origin, sexual orientation, political affiliation, citizenship, military status, veteran status or any other category protected by federal, state or local law. Go to our website WWW.WADI-INC.COM and click on the JOBS button for detailed job opening information.

PERSONAL	Last Name		First Name		Middle Name		Date
	List any other names you have used in the past				Preferred Method of Contact		
	Complete Address (home & mailing)			City	State	Zip Code	
	Telephone Number		Alternate Telephone Number		Email Address		
	Position applying for			How did you learn of this opening?			
County you live in		Counties you are willing to work in					

Are you legally eligible for employment in the United States? Yes No

Are you willing to take a physical examination and/or drug test at our expense upon a conditional offer of employment? Yes No

Can you perform the essential functions involved in the job for which you are applying for either with or without accomodations? Yes No

Have you been employed by us before? Yes No

Have you ever been involuntarily discharged from a job? Yes No

Are you employed now? Yes No

If hired, when will you be available to begin work? _____

EDUCATION	School	Name & Location of School	Course of Study	Did you graduate?	# of Years	Degree Received
	Graduate School					
	College or University					
	High School					
	Other Education					

Please give an accurate, complete employment record. Start with your present or most recent employer.

EMPLOYMENT	Company Name	Company Address and Telephone	Supervisor's Name	Dates Employed	Job Title	Reason for leaving
				to		
				to		
				to		
				to		
				to		

We prefer you do not use family members as references. If you do, please list why.

REFERENCES	Name and complete address	Relationship	Home Phone	Daytime Phone

We may contact the employers and references listed above unless you indicate those you do not want us to contact.

DO NOT CONTACT: (List name and reason)

Do you have any relatives working for WADI, on the Board of Directors or Policy Council? ___ Yes ___ No

If yes, list their name(s) and relationship to you: _____

Mark the items below in which you have at least one year experience or training:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Personal Computers | <input type="checkbox"/> Lotus Word Pro | <input type="checkbox"/> Microsoft Publisher | <input type="checkbox"/> Typing wpm (_____) |
| <input type="checkbox"/> Microsoft Word | <input type="checkbox"/> Lotus 123 | <input type="checkbox"/> Email | <input type="checkbox"/> Multi-line phone systems |
| <input type="checkbox"/> Microsoft Excel | <input type="checkbox"/> PowerPoint | <input type="checkbox"/> Internet searches | <input type="checkbox"/> Fax machines |

Other (list): _____

CRIMINAL BACKGROUND INQUIRY

A "YES" response to any question on this page will not necessarily disqualify you from consideration for employment. The nature and circumstances of any conviction, how long ago it occurred, and other facts, including the relevancy of the conviction to the position for which you are applying, are all important in the employment consideration. Therefore, please provide a complete response to the questions so that an appropriate decision may be made. A criminal background check is conducted on every WADI employee upon offer of conditional employment.

Have you ever been convicted of or pleaded guilty to a misdemeanor or felony other than a parking violation? You are not obligated to disclose sealed or expunged records of conviction. Check one:

YES NO If yes, please state (a) nature of the offenses for which you were convicted or pleaded guilty; (b) dates of convictions or pleas; (c) judgements imposed; (d) location of courts imposing the judgements:

(a) _____
(b) _____
(c) _____
(d) _____

In order to help safeguard Head Start/Early Head Start children from child abuse and neglect, federal policies now require that Head Start agencies require all prospective employees to sign a declaration prior to employment which lists:

- 1) All pending and prior criminal arrests and charges related to child sexual abuse and their disposition
- 2) Convictions related to other forms of child abuse and/or neglect; and
- 3) All convictions of violent felonies.

You may exclude any offense, other than any offense related to child abuse/and or child sexual abuse or violent felonies committed before your 18th birthday, which was finally adjudicated in a juvenile court or under a youth offender law; any conviction for which the record has been expunged under Federal or State law; and any conviction set aside under the Federal Youth Corrections Act or similar authority.

Check one of the boxes below:

NO, I have NOT been arrested, charged and/or convicted on one or more of the three types of offenses listed above.

YES, I have been arrested, charged and/or convicted on one or more of the three types of offenses listed above.

If YES, please list the offense(s), date(s) of the arrest, charge and/or conviction, and other relevant information:

Applicant Signature _____ Date _____

IMPORTANT: This declaration will be kept confidential. The declaration is required to comply with rule 45 CFR Part 1301, Subpart D, Head Start Grants Administration, Personnel Policies, Section 1301.31 (b) (c) and (d).

ACKNOWLEDGEMENT AND AUTHORIZATION

I understand and agree that, if hired, my employment is for no definite period and can be terminated at any time with or without notice, with or without cause by either myself or Wabash Area Development, Inc (WADI). In the event that I am employed, I understand that regardless of the shift and job that I am first employed, I may be required to accept a change of job or shift depending on my demonstrated skills after employment and the needs of WADI. I understand that I must meet the standards established by WADI for my job classification as a condition of initial and continued employment, which may be determined by a physical examination and/or a drug test. I understand also, that if employed, I am required to abide by all rules and regulations of WADI. I understand that no supervisor, officer, agent, or representative of WADI, other than its Executive Director, has any authority to enter into any agreement for employment for any period of time, or to make any agreement contrary to the foregoing.

In addition, I understand this application will be considered active for a period of one (1) year from the application date. If I wish to be considered for any other openings within that one year time frame, I must call the Human Resources department and ask that my existing active application be considered for that opening.

I grant permission to WADI to investigate my personal, educational, and work histories thoroughly. I release WADI and its agents from liability for any acts or omissions occurring during such investigation. I further release any individual, organization, and their agents from any liability for any acts or omissions occurring in its or their responses to WADI's inquiries about me. I understand that any falsification of this application, willingly or accidental, is grounds for disqualification of employment consideration, or dismissal from employment if I am hired. I certify that I have given true and complete information in response to each category of information requested. I have also read, understood, and accepted the conditions of employment stated in this application

In addition, I authorize WADI to conduct a criminal background check upon conditional offer of employment. Should the background check disclose that I have given false information, I understand that termination of employment may result. Background checks are confidential and will be conducted during initial agency orientation by authorized staff only and be maintained in locked file cabinets in the Human Resources Department.

Applicant Name (Print Legibly):

Applicant Signature

Date

NOTE TO APPLICANT: INCOMPLETE EMPLOYMENT APPLICATIONS WILL NOT BE CONSIDERED