



-- Equal Opportunity Employer --

Please complete all items, including attachments. This application is not valid unless it is signed.

Name (Last, First) _____ Date _____

Social Security Number _____ Phone Number _____

Address (Please include City/State/Zip)

What position are you applying for? _____

Describe your interests and qualifications for this position: _____

Are you eligible for employment in the U.S.? Yes No

Are there any hours, shifts, or days you cannot or will not work? Yes No

If YES, please indicate the hours, days, or shifts you cannot work.

Are you willing to work overtime? Yes No

EDUCATION

	School	Location	Attendance From To	Date of Degree	Type of Degree
High School					
College/ University					
Other					

REFERENCES

List three references who are not related to you and who have known you at least three years.

Full Name	Present Business/Home Address	Phone Number	Business/ Occupation

WORK EXPERIENCE

Please list all previous employment for the past five years, including periods of unemployment.

Present or Last Employer _____	Employed From _____ To _____
Complete Address _____ _____ _____	Last Pay \$ _____ Per _____ Hours worked per week ____ Supervisor's Name _____
Your Title _____	_____
Duties _____ _____ _____	HR Phone # _____ No. of employees supervised _____
Reason for Leaving _____	_____

Present or Last Employer _____	Employed From _____ To _____
Complete Address _____ _____ _____	Last Pay \$ _____ Per _____ Hours worked per week ____ Supervisor's Name _____
Your Title _____	_____

Duties _____

HR Phone #

No. of employees supervised

Reason for Leaving _____

Present or

Employed

Last Employer _____ From _____ To _____

Complete Address

Last Pay

\$ _____ Per _____

Hours worked per week ____

Supervisor's Name

Your Title _____

Duties _____

HR Phone #

No. of employees supervised

Reason for Leaving _____

Present or

Employed

Last Employer _____ From _____ To _____

Complete Address

Last Pay

\$ _____ Per _____

Hours worked per week _____

Supervisor's Name

Your Title _____

Duties _____

HR Phone #

No. of employees supervised

Reason for Leaving _____

May we contact your current/previous employer(s)? Yes No

If NO, please state reason: _____

List all moving traffic violations during the last three years. (Clerical positions excluded)

Have you ever been convicted of a crime? Yes No

If YES, state the date, identity of the court or tribunal, and the nature of the conviction.

Has your name been listed on the Central Registry or have you ever been convicted of sexual assault or child molesting?

Yes No

I authorize DCH to check the Central Registry for my name.

Yes No

Do you have the ability to perform all the job related functions of this position?

Yes No

If NO, please explain. _____

I believe that I am qualified for this position because: _____

Due to the nature of the services rendered and the clients served by the Denver Children's Home, I understand that DCH must satisfy itself that prospective employees are of sound character. I therefore authorize DCH to make any and all background investigations it deems necessary to inquire into my character, including but not limited to inquiries of my former employers and educational institutions, and investigations of criminal and driving violations. If I am employed and claim to have a B.A./B.S. or above degree, I agree to furnish proof of such degree at the time of employment. I certify that the facts set forth in this application are true and complete to the best of my knowledge, and understand that false or misleading statements on this application shall be considered sufficient cause for refusal to hire and/or immediate dismissal if I am hired. Recognizing that I will be free to voluntarily terminate my employment at any time or without cause, I understand that if I am hired, the length of my employment is not guaranteed and that DCH will be free to terminate my employment at any time with or without cause.

Any Applicant who knowingly or willfully makes a false statement of any material fact or thing in the application is guilty of Perjury in the second degree as defined in Section 18-8-503 C.R.S. And, upon conviction thereof, shall be punished accordingly.

Signature _____ Date _____