



EMPLOYMENT APPLICATION

Last Name: _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Contact Number: _____

How did you hear about CLS? _____

If referred by a current staff, please list their name: _____

Have you ever applied to CLS before? Yes No If Yes, when? _____

Have you ever been employed by CLS? Yes No If Yes, when? _____

What is your available start date? _____

How many hours per week are you requesting?

- 1-10 11-20 21-30 31-40

What hours of the day are you available to work? Check all that apply.

- 6:00 AM – 9:00 AM 9:00 AM – 4:00 PM (limited shifts)
- 4:00 PM – 8:00 PM Overnights (limited shifts) Every other weekend (required)

Do you have any certifications?

- CNA LPN First Aid CPR DD Certified

Please tell us about your interest in joining the CLS Team?

What qualities do you have that would make you an ideal candidate to work at CLS?

Do you have a current driver's license? Yes No

Are you comfortable transporting individuals in your vehicle? Yes No

Do you have a clean driving record? Yes No

If No, please explain: _____

EMPLOYMENT HISTORY

Have you ever worked with individuals with disabilities before? Yes No

Business Name: _____ City: _____ State: _____

Position Held: _____ Supervisor: _____

Hire Date: _____ End Date: _____ Reason for leaving: _____

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Position Held: _____ Supervisor: _____

Hire Date: _____ End Date: _____ Reason for leaving: _____

READ THIS INFORMATION CAREFULLY BEFORE ANSWERING THE FOLLOWING QUESTIONS: The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, creed, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits and participation in union activities. The following information is needed for the position for which you are applying for a legally permissible reason, including, without limitation, national security requirements, affirmative action, a bona fide occupational qualification or business necessity.

Are you 18 or older? Yes No Employment is subject to verification of minimum legal age.

Are you authorized to work in the United States on a full-time basis for all employers, or for your current employer only?

All Employers Current Employer Only

Have you ever been convicted of a felony? Yes No

If Yes, please provide dates and offenses: _____

Are you able to perform the duties of the position with or without special accommodations?

With Special Accommodations Without Special Accommodations

I understand and agree that:

1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination.

2. Any offer of employment I may receive from CLS is contingent upon my successful completion of the company's pre-employment screening process, including receiving references that it considers satisfactory.

3. I understand that as a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, **I may be required to submit to an alcohol or drug screening at any time at the discretion of CLS.** I hereby consent to having the results of any such alcohol or drug screening I may be required to undergo disclosed to CLS.

Signature: _____ Date: _____