



Today's Date: _____

Employment / Volunteer Application

Name: _____ Are you at least 18 years old? Yes No

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

Social Security Number: _____ Driver's License Number: _____

- For which position are you applying? _____
- Please indicate your understanding of the duties included in the position for which you are applying: _____

3. What hours are you available? Please list below. 4. Are you currently employed? Yes No

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

5. May we contact your employer? Yes No N/A *If "yes," please provide your employer's information.*

Name: _____ Phone #: _____

6. Do you have an impairment that may keep you from performing any duties for which you have applied?

Yes No If "Yes," please explain: _____

7. Please list below any degrees/licenses/certificate/CEU/trainings – Please indicate if you finished.

Degrees/Licenses/Certificate/CEU Trainings	Date Received	Did you complete this?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

8. Have you ever been charged with a crime? Yes No If "Yes," please explain: _____

9. Did this result in a conviction? Yes No

10. Year of conviction: _____

11. Did you complete the terms of conviction? Yes No

12. Please add anything else you want us to know about you: _____

Committed and Responsive

www.mosaicfamilyinc.com *We all deserve to be happy and feel capable in life* info@mosaicfamilyinc.com

5005 Douglas Avenue, Suite 101
Des Moines, IA 50310
Phone: (515) 724-8920
Fax: (888) 771-3225

2343 US Highway 169
Mount Ayr, IA 503854
Phone: (641) 781-0082
Fax: (888) 771-3225

531 West Main Street
Lamoni, IA 50140
Phone: (641) 781-0082
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13. If you are applying for a position to provide services to individuals, do you have a history of working with individuals who have been victims of physical, emotional, sexual abuse or child neglect? Yes No

14. Please explain your duties in that area: _____

15. How do you preferred to be supervised? _____

16. If you are applying for a position to work with children, what age group and gender of children do you want to work with? _____ How do you feel about working with children other than these preferences? _____
Why does this age group appeal to you? _____

17. If you are applying for a position to work with children, What make you a good candidate for working with youth? _____

18. If you are applying for a position to work with children, give 3 references of people who know your work as it pertains to children. Please list them below.

Name	How are you two acquainted?	Telephone #	Years Known

19. What strengths do you have that qualifies you for this position? _____

20. What other hobbies or activities do you enjoy? _____

21. What salary are you hoping to achieve? _____ Are you interested in advancement? Yes No

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22. Begin with you most recent employer and document your last 7 years of employment.

Name of Company: _____ Phone Number: _____

Supervisor's Name: _____ Salary: _____ Did you work with Children? Yes No

Address: _____

When did you start this position? _____
Street Name City/State Zip Code

What was your position and what did you like about it? _____

Name of Company: _____ Phone Number: _____

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Address: _____

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