



Morris
Foundation
Behavioral Health Services

APPLICATION FOR EMPLOYMENT

Please answer all questions and print legibly.

Position desired _____

Name _____
(First) (Middle) (Last)

Street Address _____ Telephone Number _____

City/State/Zip Code _____ Best time to contact _____

Work schedule desired: Full-time Part-time Temporary Internship Volunteer

Preferred location and work hours _____

Salary requirement _____ Date available to begin work _____

How were you referred to us? _____

Are you legally permitted to work in the United States? _____ Yes _____ No

Please list any other names by which you have been known which we should be aware of to adequately verify your identity, employment and educational history. _____

Criminal Inquiry

Have you ever been convicted of a felony? _____ Yes _____ No

If so, please describe fully the criminal conviction(s) listing the nature of the offense, the date of the offense, and your rehabilitation since the conviction(s). (A conviction record will not necessarily be a bar to employment.)

PLEASE NOTE

- (1) You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to section 46b-146, 57-76o or 54-142a of the Connecticut General Statutes;
- (2) Criminal records subject to erasure pursuant to section 46b-146, 54-76o or 54-142a are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon;
- (3) If your criminal records have been erased pursuant to section 46b-146, 54-76o or 54-142a, you shall be deemed to have never been arrested within the meaning of the Connecticut General Statutes with respect to the proceedings so erased and may so swear under oath.

General Information

Have you been employed here previously? Yes No If yes, when/what position? _____
Reason for leaving _____

Have you ever applied for a position here before? Yes No If yes, when? _____

List below your knowledge, skills and abilities that you believe qualify you for the position at Morris Foundation, Inc. If you need more space, please continue on a separate sheet. _____

Education

	City/State	Major/Minor Subject	Grade Completed	Diploma/Degree
High School				
Technical/Business School				
College/University				
Graduate Studies				
Licenses/Certification				
Any Other Job Related Training				

Are you planning to pursue further studies? Yes No
If yes, where and what major? _____

Employment Record

Beginning with your ***most recent***, list all previous employers. Include self-employment, summer and part-time jobs. Also include any verified volunteer work. If presently employed, why do you seek to change your position? _____

Company _____ Dates Employed _____
From To

Street _____ Starting Salary _____

City/State/Zip _____ Ending Salary _____

Supervisor _____ Phone _____

Position/Duties _____

Reason for leaving _____

May we contact? Yes No

Company _____ **Dates Employed** _____
 _____ **From** _____ **To** _____
Street _____ **Starting Salary** _____
City/State/Zip _____ **Ending Salary** _____
Supervisor _____ **Phone** _____
Position/Duties _____
Reason for leaving _____
May we contact? Yes _____ **No** _____

Company _____ **Dates Employed** _____
 _____ **From** _____ **To** _____
Street _____ **Starting Salary** _____
City/State/Zip _____ **Ending Salary** _____
Supervisor _____ **Phone** _____
Position/Duties _____
Reason for leaving _____
May we contact? Yes _____ **No** _____

Company _____ **Dates Employed** _____
 _____ **From** _____ **To** _____
Street _____ **Starting Salary** _____
City/State/Zip _____ **Ending Salary** _____
Supervisor _____ **Phone** _____
Position/Duties _____
Reason for leaving _____
May we contact? Yes _____ **No** _____

Provide dates and explanation for any gaps in your employment history _____

Supervisory References

Provide three names of individuals **not related to you**, who are familiar with your work performance ability.

Name	Address	Telephone #	Business	Years Acquainted
1)				
2)				
3)				

Morris Foundation, Inc. is committed to a policy of Equal Employment Opportunity and does not discriminate against applicants or employees on the basis of race, color, religion, creed, age, sex, marital status, sexual orientation, national origin, ancestry, veteran status or any other recognized protected basis under federal, state or local law. Applicants with disabilities may be entitled to reasonable accommodation under applicable federal and state law. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing an undue hardship on Morris Foundation. Please inform your interviewer if need assistance in completing any forms or otherwise participating in the application process.

APPLICANT CERTIFICATION
PLEASE READ BEFORE SIGNING

If you have questions regarding this certification, please ask the employment interviewer before signing.

In the event, I am employed by Morris Foundation, Inc., I will comply with all rules and regulations as set forth in Morris Foundation’s policy manual and in any communications made to me. I understand that if I am hired, my employment with Morris Foundation, Inc. will be “at will.” This means that my employment is not for a specified term and that it may be terminated by Morris Foundation, Inc. or me at any time, for any reason, with or without cause or notice. **I understand that no document or any statement from any employee of Morris Foundation, Inc. constitutes a contract of employment between me and Morris Foundation that in any way alters or changes my employment at will status.** I further understand that the “at will” nature of my employment cannot be changed except by a formal written contract signed by the President/CEO of Morris Foundation, Inc. I understand that this Application for Employment does not constitute an agreement or contract for employment between me and Morris Foundation.

_____ (Please initial)

I certify that there are no misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the responses given are true, complete and accurate to the best of my knowledge and are made in good faith. Without limiting the at will status of my employment if I am hired, I understand that if any of the statements on this application are untrue or incomplete, I may be immediately discharged. I understand that any falsification or omission of information may result in denial of employment or, if hired, may result in termination regardless of the time lapse before discovery. _____ (Please initial)

I understand that any employment or offer of employment arising from this Application for Employment will be subject to satisfactory verification of all job qualifications and information contained in this Application for Employment which may include academic credentials, licenses, professional designations, references, credit and employment history, motor vehicles and criminal background. Unless otherwise noted above, I authorize the educators and employers listed in this application to furnish Morris Foundation, Inc. with information regarding my education, employment history or any other matter related to my application for employment with Morris Foundation, Inc. _____ (Please initial)

I certify that I have read and fully understand and accept all terms of the foregoing Applicant Certification.

Signature of Applicant _____

Date _____

Do Not Write Below this Line

Interviewed by _____ Date _____

Remarks _____

DOH _____ Position _____ Wages _____