

The Comprehensive Center Companies

EMPLOYMENT APPLICATION

Please print clearly and complete both pages of this application.

THE COMPREHENSIVE CENTER COMPANIES IS AN EQUAL OPPORTUNITY EMPLOYER

and will not discriminate on the basis of race, creed, religion, color, national origin, ancestry, age, sex, affectional or sexual orientation, genetic information, familial status, marital status, atypical hereditary cellular or blood trait (including Sickle Cell Trait, Tay Sachs Disease or Cooley's Anemia), handicap, disability (including AIDS and HIV infection), liability for service in the United States Armed Forces or any other legally protected status. The Comprehensive Center Companies will make a reasonable accommodation to known physical or mental limitations of a qualified applicant or employee with a disability unless the accommodation would impose an undue hardship on our operation.

Name:	(Last)	(First)	(Middle)	Today's Date:
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Permanent Address: (Number, Address)	(City, State)	(Zip Code)
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Mailing Address: (Number, Address)	(City, State)	(Zip Code)
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Phone Number Where You May Be Reached:	Cell Phone Number Where You May Be Reached:	Email Address:
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Are you either a U.S. Citizen or an alien who is authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>*If you answer "yes" you must complete the I-9 form required by the Department of Homeland Security no later than three (3) business days after your date of hire.</small>	Have you ever been convicted of or plead guilty to any crime or any other offense, other than a minor traffic violation, which has not been expunged or sealed by the court? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>*A conviction or guilty plea will not necessarily be a bar to employment. Please describe the nature of the conviction or guilty plea, the date, and your rehabilitation since the conviction or guilty plea on the back of this application.</small>
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Company Applying To:	<input type="checkbox"/> Staffing Solutions NY <input type="checkbox"/> Home Care Services NY <input type="checkbox"/> Staffing Solutions CA <input type="checkbox"/> Home Health Services CA	<input type="checkbox"/> Medicine and Rehab <input type="checkbox"/> Kids Developmental School
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Position Desired:	Schedule Preferred:
<input type="checkbox"/> Administration <input type="checkbox"/> Therapist <input type="checkbox"/> Teacher <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time

Currently Employed? <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Not Employed	How were you referred to us? <input type="checkbox"/> Employee <input type="checkbox"/> Ad (Which one) <input type="checkbox"/> Agency <input type="checkbox"/> Other: _____	Have you ever been employed by The Comprehensive Center Companies? <input type="checkbox"/> Yes <input type="checkbox"/> No Dates Employed: From _____ To _____ Reason For Leaving: _____
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Special training, skills or experience you feel are relevant to the position desired. (Exclude any information that may reveal your membership in a legally protected classification listed above.) _____

List professional organizations of which you are a member that you feel are relevant to the position desired. (Exclude any information that may reveal your membership in a legally protected classification.) _____

What are the most important things that make a company a good place to work? _____	What are some of the things you didn't like about your previous job's? _____
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EDUCATION

School	Name & Address of School	Phone Number	Course of Study	# of Yrs Completed
High School				
College				
Other (Specify)				
Other (Specify)				

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PREVIOUS EMPLOYMENT

List in order of employment starting with your present employment. Please account for all time including current employment, military service, part time jobs and periods of unemployment. If you held two jobs at the same time, be sure to list both jobs. State if any of these employers are related to you. Use additional sheet if necessary.

Name of Employer	Address	Job Title	Salary		Reason for Leaving	Dates of Employment	
			Start	End		From	To

REFERENCES

List the names of three previous supervisors/managers for whom you have worked:

Name:	Business Address:	Phone Number:	Type of Business:	Years Acquainted

IMPORTANT (PLEASE READ AND SIGN)

I understand that any misstatement, omission or misleading information given in my application or interview or in connection with other Comprehensive Center Companies' records may result in the rejection of my application, the withdrawal of any offer of employment or my dismissal.

I authorize an investigation of all statements contained in this application for employment. I release from all liability and responsibility all persons and entities requesting or supplying information about any information provided on this application, including my present employer. I also authorize The Comprehensive Center Companies to conduct a check into my criminal conviction record.

I understand that if employed by The Comprehensive Center Companies, both during and subsequent to my introductory period, I will be an employee at-will, which means that I can voluntarily end my employment or be terminated at any time without cause or notice. No statement, whether written or oral, by any Comprehensive Center Companies representative other than a written statement signed by the President of The Comprehensive Center Companies may vary the foregoing.

I CERTIFY THAT I HAVE READ THE ABOVE, UNDERSTAND IT AND AGREE TO IT:

Signature of Applicant

Date

IF APPLICATION IS NOT FILLED OUT COMPLETELY, IT WILL BE DISCARDED.