



Download application,
complete fillable PDF, save
copy to your computer, email
completed form to
applications@lenapope.org

Employment Application

IMPORTANT: Please read this application and all terms of employment carefully. Answer all questions completely before submitting the application. All information will be treated confidentially. Lena Pope is an equal opportunity employer.

PLEASE PRINT CLEARLY

Name: _____ Date: _____
First Middle Last

Address: _____ City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Relatives Employed at Lena Pope: _____

KCF? BH9F9HG

Position for which you are applying: _____ Salary Expected: _____

Type of work desired: Full Time ____ Part Time ____ Earliest Availability Date: _____

Have you ever filed an application with Lena Pope? Yes No If yes, when? _____

Have you ever been interviewed by Lena Pope? Yes No If yes, when? _____

Briefly state reasons for interest in employment with Lena Pope Home, Inc. Include how you became aware of Lena Pope Home, Inc. and the position for which you are applying:

PROFICIENCIES

Applicants who have the following proficiencies should complete this section:

Software programs/platforms: _____

Languages other than English, which you: Speak proficiently _____
Read proficiently _____
Write proficiently _____

PREVIOUS EMPLOYMENT/VOLUNTEER EXPERIENCE

List each of your employers and/or volunteer experiences starting with the most current and working backwards to your first. Include all previous work experience, military service record and periods of unemployment. For any periods of self-employment or unemployment greater than one month, list name and address of an individual able to verify your activities during this period(s).

Employer	Full Time Part Time From mm/yyyy	To mm/yyyy
Address	Phone Number	
Position	Supervisor Name	
Responsibilities	Salary	
Reason for leaving		

Employer	Full Time Part Time From mm/yyyy	To mm/yyyy
Address	Phone Number	
Position	Supervisor Name	
Responsibilities	Salary	
Reason for leaving		

Employer	Full Time Part Time From mm/yyyy	To mm/yyyy
Address	Phone Number	
Position	Supervisor Name	
Responsibilities	Salary	
Reason for leaving		

List memberships in any professional, technical, or trade organizations, past and current:

Within the past three years, what job or volunteer responsibilities have given you the most personal satisfaction and why?:

List acquaintances employed by Lena Pope:

EDUCATION/BACKGROUND

List schools attended, beginning with high school. Include technical schools and other special training.

Type of Institution	Name of Institution	City & State	
Level of Completion	Area/Field of Study	GPA	Date of Completion
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Type of Institution	Name of Institution	City & State	
Level of Completion	Area/Field of Study	GPA	Date of Completion

If you have coursework toward a degree that has not been completed, how many hours are still needed?

Associate _____ Bachelor _____ Master _____ Doctorate _____

List any scholarships, academic honors, awards, or special achievements:

List licensures and certifications with corresponding licensing numbers and name of licensing body:

REFERENCES

Include telephone number and complete address, city, state, zip code.

- **One reference must be a person of the opposite sex.**

PERSONAL (not living with you)

Name		Street Address		
City	State	Zip	Email	Phone

PROFESSIONAL/CIVIC

Name		Street Address		
City	State	Zip	Email	Phone

FAMILY MEMBER (not living with you)

Name		Street Address		
City	State	Zip	Email	Phone

LEGAL HISTORY

For any “yes” answers, please attach a detailed explanation in writing.

- | | | |
|---|---|---|
| Y | N | Have you ever been convicted of a criminal offense (felony or misdemeanor)?
Answer “yes” if you have entered a plea agreement, including a deferred sentence or deferred judgment arrangement, in connection a criminal case. |
| Y | N | Have you ever been charged with a sexual offense, offense relating to children, or crime of violence? |
| Y | N | Have you ever reported to any organization or registry for abuse or misconduct involving children? |
| Y | N | Do you have any disciplinary action or investigation pending by an employer, other organization, professional association, or licensing body, for violence, sexual misconduct, or misconduct involving children? |
| Y | N | Have you ever been disciplined or dismissed from any volunteer position or employment for any reason or following an allegation of sexual misconduct, physical aggression, verbal aggression, or other inappropriate behavior or conduct? |
| Y | N | Have you ever been reprimanded, or asked to leave or end your membership in, an organization in which you were volunteering? |
| Y | N | Have you ever been the subject of a complaint or disciplinary proceeding against any professional license or professional affiliation held by you? |
| Y | N | Do you now, or have you ever, sought out or intentionally viewed child pornography? |

TERMS OF EMPLOYMENT

I, the undersigned applicant, represent that all information given by me in this application is true and correct. I authorize Lena Pope Home, Inc. (herein called "the Company") to investigate and verify all information provided by me in this application and to contact any reference supplied by me. Should I be employed by the Company, I agree that:

1. My employment shall be at will and in accordance with the terms of this application and any orders, rules or regulations of the Company, which shall have the right to amend, modify or revoke its orders, rules or regulations at any time without notice. I will take such steps to make myself familiar promptly with all rules and regulations and agree to be bound by those rules and regulations as they now or hereafter exist.
2. My employment may be terminated by the Company at any time without advance notice, its only obligation to pay wages or salary earned by me to the date of termination. Without limitation, failure to abide by Company rules and regulations, failure to pass any Company physical examination or failure to follow any Company order shall entitle the Company to terminate me. I further agree that, should the Company determine that any information provided in this application is untrue in any material respect, the Company will be entitled to terminate immediately my employment.
3. I agree to submit to medical examinations by a physician selected by the Company at such times as it may request and agree to submit to such examinations before making any claim against the Company for injuries suffered in connection with my employment.
4. I agree that my employment may be contingent upon my meeting all placement considerations including medical requirements.
5. I agree that I shall have no right, title or interest in any to any material produced or inventions developed by me which affect or relate to the Company's business, including, without limitation, all copyrights and patents.

Signature of Applicant

Date

**AFFIDAVIT FOR APPLICANTS FOR EMPLOYMENT WITH A
LICENSED OPERATION OR REGISTERED CHILD-CARE HOME**

AN APPLICANT FOR TEMPORARY OR PERMANENT EMPLOYMENT with a licensed child-care facility, licensed child-placing agency or registered child-care home whose employment or potential employment with the facility, agency, or home involves direct interaction with or the opportunity to interact and associate with children must execute and submit the following affidavit with the application for employment.

"Texas law gives you the right to know what information is collected about you by means of a form you submit to a state government agency. You can receive and review this information, and request that incorrect information about you be corrected by contacting your licensing representative."

STATE OF _____

COUNTY OF _____

I swear or affirm under penalty of perjury that I do not now and I have not at any time, either as an adult or as a juvenile:

1. Been convicted of;
2. Pleaded guilty to (whether or not resulting in a conviction);
3. Pleaded nolo contendere or no contest to;
4. Admitted;
5. Had any judgment or order rendered against me (whether by default or otherwise)
6. Entered into any settlement of an action or claim of;
7. Had any license, certification, employment, or volunteer position suspended, revoked, terminated, adversely affected because of;
8. Resigned under threat of termination of employment or volunteerism for;
9. Had a report of child abuse or neglect made and substantiated against me for; or
10. Have any pending criminal charges against me in this or any other jurisdiction for;

Any conduct, matter, or thing (irrespective of formal name thereof) constituting or involving (whether under criminal or civil law of any jurisdiction):

1. Any felony;
2. Rape or other sexual assault;
3. Physical, sexual, emotional abuse and/or neglect of a minor;
4. Incest;
5. Exploitation, including sexual, of a minor;
6. Sexual misconduct with a minor;
7. Molestation of a child;
8. Lewdness or indecent exposure;
9. Lewd and lascivious behavior;
10. Obscene or pornographic literature, photographs, or videos;
11. Assault, batter, or any violent offense involving a minor;
12. Endangerment of a child;
13. Any misdemeanor or other offense classification involving a minor or to which a minor was a witness;
14. Unfitness as a parent or custodian;
15. Removing children from a state or concealing children in violation of a court order;
16. Restrictions or limitations on contact or visitation with children or minors resulting from a court order protecting a child or minor from abuse, neglect, or exploitation, or,
17. Any type of child abduction.

Except the following (list all incidents, locations, description, and date. If none, write NONE)

The failure or refusal of the applicant to sign or provide the affidavit constitutes good cause for refusal to hire the applicant.

Signed: _____ Date: _____

Subscribed and sworn to (or affirmed) before me this _____ day of _____

Signature of notary officer: _____
(seal, if any, of notary officer)

My commission expires: _____

Lena Pope Home Inc. Consumer Report Disclosure Form

Lena Pope Home, Inc. may, with your consent, obtain a consumer report (as defined by the Fair Credit Reporting Act) from Imperative Information Group, Inc., a Consumer Reporting Agency, related to your prospective, current, or future employment. This may include procurement of an investigative consumer report (defined as a report that includes information as to your character, general reputation, personal characteristics, or mode of living).

You may request that the nature and scope of any investigative consumer report to be disclosed to you. Such disclosure will be made within five days of our receipt of the request from you or five days after the date the investigative consumer report was first requested, whichever is later.

By signing below, you grant permission to Lena Pope Home, Inc. or any of its affiliated or subsequent companies to obtain such report or reports at any time. You also grant permission to all parties to release information regarding your previous or current military service, employment, education, or criminal matters to Imperative Information Group, Inc., including information which may be deemed negative.

Signature

Date

Identity Information

First Name:

Middle Name:

Last Name:

Current Home Address:

City: State: Zip:

Other Names Used:
(maiden names or aliases)

Social Security Number: - -

Drivers License State: Number:

Date of Birth Month: Day: Year:

Please list each city/county and state in which you have lived, worked, or attended school during the last ten years.
Use a second form if necessary to provide full disclosure.

City: OR County: State:

City: OR County: State:

City: OR County: State:

City: OR County: State:

City: OR County: State:

City: OR County: State: