





## Employment History

### Present or Most Recent Position:

May we contact your present employer about you?  Yes  No

Employer Name _____ Address _____ _____ Job Title _____	Dates of Employment Month/Year From: ____/____  To: ____/____	Salary Start \$ _____ Final \$ _____	Average Hrs. Per Week _____ _____
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Telephone \_\_\_\_ - \_\_\_\_\_ Name and Title of Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

### Former Position

Employer Name _____ Address _____ _____ Job Title _____	Dates of Employment Month/Year From: ____/____  To: ____/____	Salary Start \$ _____ Final \$ _____	Average Hrs. Per Week _____ _____
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Telephone \_\_\_\_ - \_\_\_\_\_ Name and Title of Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

### Former Position

Employer Name _____ Address _____ _____ Job Title _____	Dates of Employment Month/Year From: ____/____  To: ____/____	Salary Start \$ _____ Final \$ _____	Average Hrs. Per Week _____ _____
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Telephone \_\_\_\_ - \_\_\_\_\_ Name and Title of Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

In compliance with the Department of Children & Families' requirements, no person shall be hired or retained as a staff member, paid or volunteer, who has:

- a. Been convicted or admitted to or been the subject of substantial evidence of an act of child battering, child abuse, or child molesting.
  
- b. Used alcohol or drugs such as its effects are apparent during working hours that children are in care, or
  
- c. Been convicted of or admitted to any felony or any offense involving moral turpitude

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for immediate dismissal. I attest to the accuracy of the answers above under penalty of perjury.

Signature: \_\_\_\_\_ Date \_\_\_\_\_