## Prevention Works, Inc. EMPLOYMENT APPLICATION

PREVENTION

WORKS

Educate - Collaborate - Motivate

## **Applicant Information**

Preferred Name:		Pronouns (circle): she/her, he/him, they/them, other			
				Data of D	inthe c
Full Name:	Last	First		<i>M.I.</i> Date of B	irth:
Address:					
	Street Address				Apartment/Unit #
	City			State	ZIP Code
Phone:			Email		
Date Availat					lary: <b>\$</b>
Position App					-
	s by which you have b				
*This information remains completely confidential and will not be shared with anyone other than the people who review the application. Prevention Works has an LGBTQ+ Liaison on staff to ensure policy and procedures are affirming and inclusive for all. For more information, you may reach out to our LGBTQ+ Liaison, Emily Van Wey (she/her) at <u>emily@preventionworks.us</u>					
Are you a cit	izen of the United Sta	YES NO tes?	lf no, are you	authorized to work i	YES NO n the U.S.? □ □
Have you ev	YES NO Have you ever worked for this company?				
Have you ev	er been convicted of a	YES NO a felony?			
If yes, explain:					
		Educ	ation		
High School	:	Address	:		
From:	То:	Did you graduate?	YES NO	Diploma::	
College:		Address	:		
From:	То:	Did you graduate?	YES NO	Degree:	
Other:		Address			
From:	To:	Did you graduate?	YES NO	Degree:	

References

Please list three	professional references.	
Full Name:		Relationship:
Company:		Dhanay
Address:		
Full Name:		Relationship:
Compony		Phono:
Address:		
Full Name:		Relationship:
0		Dhanas
Address:		
	Previous Employme	ent
Company:		Phone:
Address:		- · ·
Job Title:	Starting Salary:	Ending Salary: <b>\$</b>
Responsibilities:		
From:		.eaving:
May we contact y	YES our previous supervisor for a reference?	NO
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:	Ending Salary: <u>\$</u>
Responsibilities:		
		.eaving:
May we contact y	YES our previous supervisor for a reference?	NO
Company:		Phone:
Job Title:	Starting Salary:	Ending Salary: <u>\$</u>
Responsibilities:		

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From:			То:	Reason for Le	aving:	
May w	/e cont	act your pre	vious supervisor for a reference?	YES N	10	
Military Service						
Branc	h:				From:	To:
Rank	at Disc	harge:		Type of Disc	harge:	
If othe	r than	honorable, e	explain:			
Residence History List all addresses which you have lived at since birth. DO NOT include your present address. Account for all of the time with your most recent prior address first. If a military veteran, include the names of all bases at which you were stationed as well as any off-base residences.						
From:	Mo.	Yr.	Address (Complete street address)		With whom did you	live?
To:	Mo.	Yr.	Address (City, State, Zip)		Relationship	
From:	Mo.	Yr.	Address (Complete street address)		With whom did you	live?
To:	Mo.	Yr.	Address (City, State, Zip)		Relationship	
From:	Mo.	Yr.	Address (Complete street address)		With whom did you	live?
To:	Mo.	Yr.	Address (City, State, Zip)		Relationship	
<b>F</b>		Ma			MCth and a secolar data	line 0
From:	IVIO.	Yr.	Address (Complete street address)		With whom did you	live ?
To:	Mo.	Yr.	Address (City, State, Zip)		Relationship	
From:	Mo.	Yr.	Address (Complete street address)		With whom did you	live?
To:	Mo.	Yr.	Address (City, State, Zip)		Relationship	
From:	Mo.	Yr.	Address (Complete street address)		With whom did you	live?
To:	Mo.	Yr.	Address (City, State, Zip)		Relationship	

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From: Mo.	Yr.	Address (Complete street address)	With whom did you live?
To: Mo.	Yr.	Address (City, State, Zip)	Relationship
From: Mo.	Yr.	Address (Complete street address)	With whom did you live?
To: Mo.	Yr.	Address (City, State, Zip)	Relationship

## **Disclaimer and Signature**

I certify that my answers are true and complete to the best of my knowledge.

I certify that Prevention Works has my permission to contact the references listed on this application to inquire about job performance. Including but not limited to, inquiries about various competencies, quality of work, and attendance.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date: