

## **INDIAN CHILD AND FAMILY PRESERVATION PROGRAM**

2525 Cleveland Avenue, Suite A, Santa Rosa, CA 95403 • 707-544-8509

## **Employment Application**

| Full Name:                          |                                      | Date:                          |
|-------------------------------------|--------------------------------------|--------------------------------|
| Address:                            |                                      |                                |
| Street Address                      |                                      | Apartment/Unit #               |
|                                     |                                      |                                |
| City                                | State                                | Zip Code                       |
| Phone:                              | Email:                               |                                |
| Emergency Contact:                  | Phone:                               |                                |
| Date Available:                     | Social Security No:                  | Desired Salary: \$/ <u>hr.</u> |
| Position Applied For:               |                                      |                                |
| Are you a U.S. Citizen? Yes         | No If no, are you authorized to work | in the U.S.? Yes No            |
| Have you ever worked for ICFPP      | ? Yes No If yes, when?               |                                |
| Have you ever been convicted of     | a felony? Yes No                     |                                |
| If yes, explain:                    |                                      |                                |
|                                     | Education                            |                                |
| High School:                        | Address:                             |                                |
| From: To:                           | Did you graduate? Yes N              | No Diploma:                    |
| College:                            | Address:                             |                                |
| From: To:                           | Did you graduate? Yes N              | No Degree:                     |
| Other:                              | Address:                             |                                |
| From: To:                           | Did you complete? Yes ]              | No Degree/:<br>Certificate     |
|                                     | References                           |                                |
| Please list three professional refe | rences.                              |                                |
| Full Name:                          |                                      | Relationship:                  |
| Company:                            |                                      | Phone:                         |
|                                     |                                      | :                              |
|                                     |                                      | Relationship:                  |
| Company:                            |                                      | Phone:                         |
| Address:                            |                                      | :                              |

| Full Name:   | Relationship:                                    |  |
|--|--|--|
| Company:   | Phone:   |  |
| Address:   | Email:   |  |
| Previous Emplo   | yment  |  |
| Company:   | Phone:   |  |
| Address:   | Supervisor:                                      |  |
| Job Title: Starting Salar                                | ry: \$/ <u>hr.</u> Ending Salary: \$/ <u>hr.</u> |  |
| Responsibilities:  |  |  |
|  | g:   |  |
| May we contact your previous supervisor for a reference? | Yes No   |  |
| Company:   | Phone:   |  |
| Address:   | Supervisor:                                      |  |
| Job Title: Starting Salar                                | ry: \$/ <u>hr.</u> Ending Salary: \$/ <u>hr.</u> |  |
| Responsibilities:  |  |  |
| From: To: Reason for Leaving                             | g:   |  |
| May we contact your previous supervisor for a reference? |  |  |
| Company:   |  |  |
| Address:   | Supervisor:                                      |  |
| Job Title: Starting Salar                                | ry: \$/ <u>hr.</u> Ending Salary: \$/ <u>hr.</u> |  |
| Responsibilities:  |  |  |
| From: To: Reason for Leaving                             | g:   |  |
| May we contact your previous supervisor for a reference? | Yes No   |  |
| Military Serv  | vice   |  |
| Branch:  | From: To:  |  |
| Rank at Discharge:                                       | Type of Discharge:                               |  |
| If other than honorable, explain:                        |  |  |

## **Indian Preference**

Preference in filling vacancies will be given to qualified Indian applicants in accordance with Federal Law, including the Indian Self-Determination Act (Public Law 93-638). Subject to the foregoing, Indian Child & Family Preservation Program is an equal opportunity employer. All application forms and resumes are subject to the provisions of the Privacy Act (Public Law 93-579, Section 78) and become the property of Indian Child & Family Preservation Program.

## Disclaimer and Signature

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

As a condition of employment with ICFPP, I understand that I will submit to Live Scan Fingerprinting in order to conduct a criminal background check.

| If this application leads to my employment, I under | rstand that false or misleading information in my application or |
|---|--|
| interview may result in my release from employme.   | nt. I understand that all ICFPP Employees are considered to be   |
| 'at will' employees.                                |  |
| Signature:  | Date:  |