

Please submit completed application and resume to hr@harmonyfamilycenter.org

Applicant Information										
Full Name:							_ Date:			
	Last			First		M.I.				
Address:	Street Address						Apartme	ent/Unit #		
	City					State	ZIP Cod	le		
Phone:				Email						
Date Availab	ired Salary:	\$								
Position App	olied for:									
Are you a cit	izen of the United States?	YES	NO	If no, a	ire you a	authorized to wo	rk in the U.S.?	YES	NO	
Have you eve	YES	NO	If yes, when?							
Have you eve	YES	NO								
If yes, explain	n:									
			Educ	ation						
High School:	:	Ad	ldress:							
From:	To:	Did you gra	aduate?	YES	NO	Diploma:				
College:		Ad	ldress:							
From:	To:	Did you gra	aduate?	YES	NO	Degree:				
Other:		Ad	ldress:							
From:	To:	Did you gra	aduate?	YES	NO	Degree:				
			Refer	ences						
·	ide three professional referer						p:			
Address:										

Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Work Experience	
Company:	Phone:
Address:	Supervisor:
Job Title:	Salary Range: \$
Responsibilities:	
From:To: Reason for Leaving:	
May we contact your previous supervisor for a reference? Yes \Box No	
Company:	Phone:
Company:	Phone:
Company:Address:	Phone:Supervisor:
Company: Address: Job Title: Responsibilities:	Phone:Supervisor:
Company: Address: Job Title: Responsibilities: From:To: Reason for Leaving:	Phone: Supervisor: Salary Range: \$
Company: Address: Job Title: Responsibilities:	Phone: Supervisor: Salary Range: \$
Company: Address: Job Title: Responsibilities: From:To: Reason for Leaving:	Phone: Supervisor: Salary Range: \$
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Military Service								
Branch:	From:	To:						
Rank at Discharge:	Type of Discharge:							
If other than honorable, explain:								
Driver's L	icense							
Do you have a Driver's License? Yes No								
Driver's License #: S	state / Exp Date:	/						
Have you had any accidents or moving violations in the past	3 years? Yes No							
Do you have a reliable means of transportation? Yes	No							
Disclaimer an	d Signature							
I certify that my answers are true and complete to the best of my If this application leads to employment, I understand that false or may result in my release.	r misleading information in my ap							
Signature:	Date:	<u>:</u>						
Note: Please be aware candidates will be asked to undergo a badisclose any prior convictions will result in immediate ineligibility		ment. Failure to						
Harmony Family Center maintains a strict policy prohibiting all conducts its affairs without regard to race, color, ethnicity, relig expression, family or marital status, veteran status, political afficharacteristic protected by federal, state or local law.	ion, sex, sexual orientation, gend	ler identity and/or						
I understand that employment with Harmony Family Center is a my employment at any tie, or for any reason consistent with app		nization may terminate						
I authorize the Organization to conduct a thorough background on this application and during interviews. I hereby release the o liability that might result from such an investigation. I authorize requested information and release them from all liability for pro-	rganization and its representative all individuals, schools and firms	es or agents from any						
I understand that the Organization requires the successful comemployment.	pletion of a drug and/or alcohol t	est as a condition of						