



Please check all that apply:

- Adelphoi Village, Inc., 1119 Village Way, Latrobe, PA 15650, 724-520-1111 FAX: 724-520-1878
 Dr. Robert Ketterer Charter School, 1133 Village Way, Latrobe, PA 15650, 724-537-9110, FAX: 724-537-9114
 Northern Tier Children's Home, 4309 SR 49, Harrison Valley, Pa. 16927, 814-334-5226, FAX: 814-334-5851

If returning by mail, send to: Human Resources Manager, 354 Main Street, Latrobe, Pennsylvania 15650

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.

(Please Print)

Date of Application _____

Position(s) Applied
for: _____

Referral Source: Advertisement Walk In Employment Agency Other _____
 Current Employee Name: _____

NAME

 _____ Last First Middle

ADDRESS

 _____ Number Street City State Zip

TELEPHONE _____ EMAIL ADDRESS _____ CELL
 PHONE _____

	YES	NO
Have you filed an application with ADELPHOI USA before? If yes, give date _____	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been employed by ADELPHOI USA before? If yes, give date _____	<input type="checkbox"/>	<input type="checkbox"/>
Have you previously completed workstudy or intern service at ADELPHOI USA? If yes, give date _____	<input type="checkbox"/>	<input type="checkbox"/>
Are you employed now?	<input type="checkbox"/>	<input type="checkbox"/>
May we contact your present employer?	<input type="checkbox"/>	<input type="checkbox"/>
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment)	<input type="checkbox"/>	<input type="checkbox"/>
Are you available to work <input type="checkbox"/> Full time <input type="checkbox"/> Part Time <input type="checkbox"/> Shift Work <input type="checkbox"/> Temporary		
Are you on a lay-off and subject to recall?	<input type="checkbox"/>	<input type="checkbox"/>
Can you travel if a job requires it?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been convicted of a felony or misdemeanor other than parking or a minor traffic violation? (Criminal conviction may be relevant if job related, but does not bar you from employment. A police check, Act 34, will be conducted) If yes, please explain. _____	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of an offense related to the abuse of children, or of a violent or assaultive behavior? (A child abuse check, Act 33 will be conducted) If yes, please explain. _____	<input type="checkbox"/>	<input type="checkbox"/>
Do you Drive? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a valid Pennsylvania Driver's License?	<input type="checkbox"/>	<input type="checkbox"/>
Have you had any traffic convictions in the last two years? If yes, explain. _____	<input type="checkbox"/>	<input type="checkbox"/>

AN EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT HISTORY

List your last three (3) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section below. List below in comments section any employers you are not able to list in spaces below.

Employer	Telephone ()	Dates Employed From To	Summarize the nature of the work performed and job responsibilities
Address			
Job Title		<u>Hourly Rate</u> Starting	
Immediate Supervisor and Title		\$	
Reason for Leaving		Final	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$	
Employer	Telephone ()	Dates Employed From To	Summarize the nature of the work performed and job responsibilities
Address			
Job Title		<u>Hourly Rate</u> Starting	
Immediate Supervisor and Title		\$	
Reason for Leaving		Final	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$	
Employer	Telephone ()	Dates Employed From To	Summarize the nature of the work performed and job responsibilities
Address			
Job Title		<u>Hourly Rate</u> Starting	
Immediate Supervisor and Title		\$	
Reason for Leaving		Final	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$	

COMMENTS (including explanation of any gaps in employment - use additional paper if necessary)

EDUCATIONAL BACKGROUND

	Elementary	High School	College	Graduate/Professional
School Name				
Years Completed (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4 Year Graduated:	1 2 3 4
Diploma/Degree				
Describe Course of Study				

Describe Specialized Training, Apprenticeship skills, and extra-curricular activities:

Honors Received:

Note to Applicant: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.
Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached. YES NO

PROFESSIONAL REFERENCES

Give complete name, address and telephone number of four professional references who can verify your professional abilities and capabilities. (Examples of acceptable references are professors, supervisors, co-workers, customers, internship supervisors, co-op teachers, etc.)

1.

(Name)	(Phone #)	(Type of Professional Relationship)
(Street)	(City)	(State) (Zip)
2.

(Name)	(Phone #)	(Type of Professional Relationship)
(Street)	(City)	(State) (Zip)
3.

(Name)	(Phone #)	(Type of Professional Relationship)
(Street)	(City)	(State) (Zip)
4.

(Name)	(Phone #)	(Type of Professional Relationship)
(Street)	(City)	(State) (Zip)

AGREEMENT

I understand that any employment by ADELPHOI USA will be on a 90 day probationary period.

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

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from employment by ADELPHOI USA if at the time of discovery of the misrepresentation I have been employed by ADELPHOI USA, I understand that I am free to resign at any time and that ADELPHOI USA reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no employee or agent of ADELPHOI USA has the authority to make any contrary assurances.

I give ADELPHOI USA the right to investigate all references and to secure additional information about me if job related. I hereby release from liability ADELPHOI USA and its representatives for seeking such information and all other parties, corporations, or organizations for furnishing such information. References attained are held in strict confidence from the applicant.

ADELPHOI USA is an Equal Opportunity Employer and as such does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on the basis prohibited by local, state, or federal law.

Signature of Applicant _____

Date _____