



Application for Employment

We do not discriminate on the basis of race, national origin, sex, sexual orientation, age, or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors. This application will remain active for three months. Paladin, Inc. participates in the U.S. E-verify program. Job Applicant Definition: A *job applicant* is someone who submits a completed *Job Application* form specifying one of our currently open job titles as their desired position. Submission of a resume only is not a job applicant.

Name (First, MI, Last)	
List any other name you've used (including married or maiden name), use of an assumed name or nickname.	
Provide the best phone number to reach you.	Provide the best email address to reach you.
Present Address: (Number, Street, Apartment, City, State, Zip)	
Immediate previous address: (Number, Street, Apartment, City, State, Zip)	
Position (s) desired.	Rate of pay expected.
Are you able to perform in a reasonable manner, with or without reasonable accommodations, the activities involved in the desired position (s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How did you learn of this opening?	Have you worked for us before? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any friends working for us? If yes, please list. <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any relatives working for us? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any relatives receiving services from us? If yes, please list. <input type="checkbox"/> Yes <input type="checkbox"/> No	
If hired, do you have reliable means of transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a clean driving record? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you able to present proof of auto insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a crime (excluding misdemeanors and summary offenses)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

HOURS OF AVAILABILITY

Paladin, Inc. provides services to our clients in a variety of programs throughout LaPorte and Porter Counties. Service may be provided in our prevocational, habilitation, community, or residential programs. There are full and part-time opportunities in each and some positions are only day hours, others are evenings, overnights, mornings and/or weekends. In order to match your availability and our needs, please answer below concerning your availability for work.

Full Time <input type="checkbox"/> Yes <input type="checkbox"/> No	Part Time <input type="checkbox"/> Yes <input type="checkbox"/> No
Evenings <input type="checkbox"/> Yes <input type="checkbox"/> No	Weekdays <input type="checkbox"/> Yes <input type="checkbox"/> No
Weekends <input type="checkbox"/> Yes <input type="checkbox"/> No	Overnights <input type="checkbox"/> Yes <input type="checkbox"/> No
Holidays <input type="checkbox"/> Yes <input type="checkbox"/> No	Any Shift <input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATIONAL BACKGROUND

Item 1

Type of school	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of school	Course of study
Address of school	

Item 2

Type of school	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of school	Course of study
Address of school	

Item 3

Type of school	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of school	Course of study
Address of school	

Have you ever served in the armed forces?

Yes No

PRIOR WORK HISTORY (LIST THREE MOST RECENT EMPLOYERS)

Item 1

Employer Name	Job Title
Starting date	Ending date
Employer Address	
Direct supervisor name and title	Phone number
Job responsibilities	
Please enter your reason for leaving (write N/A if you are still employed at this employer)	
Starting pay per hour	Ending pay per hour

Item 2

Employer Name	Job title
Starting date	Ending date
Employer Address	
Direct supervisor name and title	Phone number
Job responsibilities	
Please enter your reason for leaving (write N/A if you are still employed at this employer)	
Starting pay per hour	Ending pay per hour

Item 3

Employer Name	Job title
Starting date	Ending date
Employer Address	
Direct supervisor name and title	Phone number
Job responsibilities	
Please enter your reason for leaving (write N/A if you are still employed at this employer)	
Starting pay per hour	Ending pay per hour

PROFESSIONAL REFERENCES(LIST THREE)

Item 1

Reference name

Reference occupation

Reference telephone number

Reference address

Reference email (optional)

Item 2

Reference name

Reference occupation

Reference telephone number

Reference address

Reference email (optional)

Item 3

Reference name

Reference occupation

Reference telephone number

Reference address

Reference email (optional)

Use this space to describe any other qualifications or relevant information

Describe any types of hobbies or non-business interest you have

I fully understand that the employment relationship between Paladin, Inc. and its employees is "at will." "At will" provides that Paladin, Inc. or the employee can terminate the employment relationship at any time for any reason or no reason.

I have read, understand and agree to the paragraph above

Yes No

I declare that I have never committed an act of abuse or fraud in relationship to a dependent person. I declare that I have never knowingly violated applicable rules or laws in any previous employment in a developmental disability, health care or related setting. I declare that I have not been convicted of a crime against a dependent person or any violent crime.

I have read, understand and agree to the paragraph above

Yes No

I understand that prior to employment, or from time-to-time during the course of my employment, I may be required, to the extent permitted by the law and any applicable contract, to submit to a drug or alcohol screen, or similar test or examination, as a condition of hiring or continued employment.

I have read, understand and agree to the paragraph above

Yes No

I understand that this application may be considered active for a period of three months only and that I must complete a new application after that time.

I have read, understand and agree to the paragraph above

Yes No

I hereby certify that the facts set forth in the above application are true, correct and complete to the best of my knowledge. I understand that if employed, falsified statements on this application will be considered sufficient case for dismissal. Paladin, Inc. is hereby authorized to fully investigate all information contained in this employment application and to investigate and compile any other information that may bear upon my suitability for employment. Should I be accepted for a position, I am fully aware that my employment is contingent upon positive results of any investigation as provided above, any required drug tests, and/or driving record.

I have read, understand and agree to the paragraph above

Yes No

Signature:

Date of application:

EMPLOYMENT REFERENCE CONSENT

I have applied for a position at Paladin, Inc.

I hereby authorize, direct and request my past and present employers to furnish Paladin, Inc., with my complete records of employment together with the reasons for my separation and any and all information that such employers may possess concerning me.

I fully and completely release any and all past and present employers and their officials, officers, and agents from any and all liability or damages of any kind that could possibly accrue to me by reason of furnishing such information as I have authorized above.

I also fully and completely release Paladin, Inc. from any and all liability or damages of any kind that could possibly accrue from compiling such information as authorized above.

Printed Name

Signature

Date Signed

INTEREST QUESTIONNAIRE

In order to match your interest and our needs, please answer below concerning your interest for work.

Please check which position(s) you are interested in.

	Direct Support Professional
	Other (Please Specify)

Please select which department(s) you are interest in.

	Day Services
	Residential Habilitation Services
	Group Home Services
	Other

Which location do you prefer first/second?

	LaPorte
	Michigan City

Thank you for your interest in Paladin, Inc.