

An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT – PROGRAM COORDINATOR

Thank you for your interest in employment with The Arc of Katy. The Arc of Katy is an equal opportunity employer and selects the best matched individual for each position based on job-related qualifications, regardless of race, religion, national origin age, sex, veteran status, disability, or other protected status under state, federal, or local employment laws.

PLEASE PRINT & FILL OUT THIS FORM FULLY AND ACCURATELY.

| | | | | | |
|---|--------------------------------|-----------------|--|--------------------------------------|----------------|
| Last Name | | First | | Middle Initial | |
| Current Street Address/Apt# | | City | State | Zip Code | Home Phone# |
| Driver's License or ID# | State Issued | Expiration Date | Cell Phone: | | Email address: |
| Have you ever been convicted of a misdemeanor or a felony, received deferred adjudication, or probation, pled guilty or no contest to any criminal offense, or been convicted in a military court-martial? Important: For purposes of employment with this Arc, "conviction" includes sentenced to confinement, paid a fine, time served, placed on probation (including deferred adjudication) and/or any court-ordered restitution. <input type="checkbox"/> NO <input type="checkbox"/> YES | | | | | |
| NOTE: A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness, nature of the violation(s), and rehabilitation will be taken into consideration. | | | | | |
| If offered a position with The Arc, can you submit legal verification of your right to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | In case of emergency, notify: Name: _____ Phone#: _____ | | |
| Have you ever been employed by an Arc? <input type="checkbox"/> NO <input type="checkbox"/> YES If Yes, which Arc? _____ When? _____ Position? _____ | | | | | |
| Relatives employed by The Arc of Katy? <input type="checkbox"/> NO <input type="checkbox"/> YES | Relative's full name: | | Relationship: | Their position at The Arc: | |
| Why would you like to work with The Arc of Katy? | | | | | |
| Education History: | School Name and Address | | Diploma/Degree Received | Degree/Area of Specialization | |
| High School or GED | | | | | |
| College | | | | | |
| Graduate School | | | | | |
| Other/Tech School | | | | | |
| Proficient in the following software (please check all that apply): <input type="checkbox"/> Word <input type="checkbox"/> Excel <input type="checkbox"/> PowerPoint <input type="checkbox"/> Access <input type="checkbox"/> Other: _____ | | | | | |

The Arc of Katy Application for Part-Time Instructor. Applicant: _____

Employment History

| Dates | Employed By | Position Held | Primary Responsibilities | Reason for Leaving |
|--------------|-----------------------------|----------------------|---------------------------------|---------------------------|
| From: | Employer: | | | |
| To: | City State Phone# | | | |
| From: | Employer: | | | |
| To: | City State Phone# | | | |
| From: | Employer: | | | |
| To: | City State Phone# | | | |

CERTIFICATIONS, LICENSES & SPECIALIZED SKILLS
 (List only if related to job. Provide expiration date, if applicable.)

| Certification(s) | √ | Expiration Date(s) | From whom? |
|--------------------------|----------|---------------------------|-------------------|
| CPR | | | |
| Defensive Driving | | | |
| First Aid | | | |
| Professional License (s) | | | |
| Other: | | | |

Personal References

Please list the names, phone numbers, and relationship to you of **THREE (3) personal references**. These individuals must be at least 18 years of age, and must not be related to you.

| Information Required | Personal Reference #1 | Personal Reference #2 | Personal Reference #3 |
|-----------------------------|------------------------------|------------------------------|------------------------------|
| Name of Reference: | | | |
| How do they know you? | | | |
| Phone Number: | | | |
| Additional Phone Number: | | | |
| Email address: | | | |

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Additional Information: Please provide any additional information you would like to include as part of the application that is related to the position for which you are applying.

Authorization

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS APPLICATION. PLEASE READ THE FOLLOWING CAREFULLY BEFORE YOU SIGN BELOW.

I understand that this is only an application for employment, that no employment is being offered, and that this and any other Arc of Katy documents are not contracts of employment. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. Any person who is hired will be employed "at-will," and may voluntarily leave employment without notice or may be terminated by The Arc of Katy without notice at any time, for any reason. I understand that The Arc of Katy is free to change wages, benefits, policies, and conditions of employment at any time.

I understand that any offer of employment is contingent upon successfully passing a criminal history review, in addition to any interviews and required certifications/licenses. Additionally, a physical examination, and verification of an acceptable motor vehicle driving record may be required for application job categories.

I certify that all statements and information I have given in the course of applying for a position with The Arc of Katy are true and complete. I authorize The Arc of Katy to thoroughly investigate and verify all data, oral statements, and related papers submitted in relation to my application for employment.

I understand that any material misrepresentation(s) or omission(s), made in the course of applying for a job may be justification for refusal of employment or termination, if hired, regardless of time of discovery. I agree to abide by all present and any subsequently issued rules and policies of The Arc of Katy.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

Please return completed application to:

Administrative Assistant
P.O. Box 6133
Katy, Texas 77491
or send via email to: info@thearcofkaty.org