



**HISTORY & BACKGROUND**

Have you ever had any license or certificate of any kind revoked or suspended, or have you been sanctioned by, or is any charge or complaint now pending against you before any licensing, certification or other regulatory agency or body, public or private?  Yes  No

If yes, please provide the following: Date \_\_\_\_\_ Employer \_\_\_\_\_

Explanation: \_\_\_\_\_

Has the license been reinstated?  Yes  No Date of reinstatement: \_\_\_\_\_

Have you ever been convicted of a criminal offense?  Yes  No Answering yes to this question does not automatically bar you from employment with YDI.

If yes, state nature of crime(s), date(s) of conviction and disposition of case(s) \_\_\_\_\_

List any special skills that may qualify you for the position which you are applying

**SKILLS & TRAINING**

Are you Bilingual?  Yes  No Languages \_\_\_\_\_

Professional development training or continuing education activities

Title	Type of Training	Year

**MILITARY SERVICE**

U.S. Military Service Duties/Position \_\_\_\_\_

Branch \_\_\_\_\_ Highest Rank Held \_\_\_\_\_

Special Training \_\_\_\_\_

Active Member of the National Guard or Reserves  Yes  No List Requirements \_\_\_\_\_

**REFERENCES**

*Please list three people who are qualified to evaluate your capabilities; do not include relatives.*

NAME	PHONE	OCCUPATION	YEARS KNOWN

*Even if you submit your resume you MUST list your employment history, beginning with your most recent position.*

Employer \_\_\_\_\_ Address \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position Held \_\_\_\_\_ Wage / Salary \_\_\_\_\_

Dates Employed \_\_\_\_\_ Supervisor \_\_\_\_\_

Nature of Work \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position Held \_\_\_\_\_ Wage / Salary \_\_\_\_\_

Dates Employed \_\_\_\_\_ Supervisor \_\_\_\_\_

Nature of Work \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position Held \_\_\_\_\_ Wage / Salary \_\_\_\_\_

Dates Employed \_\_\_\_\_ Supervisor \_\_\_\_\_

Nature of Work \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position Held \_\_\_\_\_ Wage / Salary \_\_\_\_\_

Dates Employed \_\_\_\_\_ Supervisor \_\_\_\_\_

Nature of Work \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

EMPLOYMENT HISTORY

**PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID**

**ACKNOWLEDGEMENTS & AGREEMENTS**

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application and supplemental materials. I understand that any omission or misstatement of material facts on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_  
Initial here

I hereby authorize the company to investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_  
Initial here

I understand that nothing contained in the application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

\_\_\_\_\_  
Initial here

I agree to conform to the rules and regulations established by YDI. I understand that an offer of employment is not an employment contract and that I or the Company may terminate the employment relationship at any time.

\_\_\_\_\_  
Initial here

I understand that YDI is a Level 1, secured Residential Treatment Facility, that I am applying for a safety sensitive position, and that I will be working in a stressful, potentially dangerous environment with children and adolescents with emotional and behavioral disorders.

\_\_\_\_\_  
Initial here

I agree to obtain an influenza vaccine shot annually.

\_\_\_\_\_  
Initial here

I understand that I must fulfill the requirement to be fingerprinted and complete the appropriate forms regarding arrests or convictions for certain criminal offenses.

\_\_\_\_\_  
Initial here

When considering offering a position to a candidate, we need to know if you have any obligations or events already scheduled within the next six months. Please provide this information in the space indicated below.

Date Needed	Event Scheduled
_____	_____
_____	_____
_____	_____

Signature \_\_\_\_\_ Date \_\_\_\_\_