

"Providing Special Persons Opportunities for Living"



# Opportunity Living

1890 E. Main St. Lake City, IA 51449  
Phone 712-464-8961 Fax 712-464-3320

Services Accredited by:



Community Housing  
Community Integration  
Organizational Employment

## Application for Employment

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.

Position(s) applied for		Date of application	
How did you hear about us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In	
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	
Last Name	First Name	Middle Name	
Address	Street	City	State Zip
Telephone Number(s)		Social Security Number	

Best time to contact you at home is \_\_\_\_\_ AM/PM

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No

Have you ever filed an application with Opportunity Living before?  Yes  No

If yes, give approximate date \_\_\_\_\_

Have you ever been employed with Opportunity Living before?  Yes  No

If yes, give approximate date \_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

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.*  Yes  No

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full Time (please indicate 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> shift)  
 Part Time (please indicate mornings afternoons evenings)  
 Casual/Substitute

Are you currently on "lay-off" status and subject to recall?  Yes  No

Can you travel if a job requires it?  Yes  No

Do you have a record of founded child or dependent adult abuse or have you ever been convicted of a crime in this or any other state?  Yes  No

If Yes, please explain: \_\_\_\_\_

Nothing in this application is intended to alter in any way the understanding and fact that any Employment relationship with Opportunity Living is of an "at-will" nature.  
**Opportunity Living is an Equal Opportunity Employer.**

# Education:

	Elementary School	High School	Undergraduate College	Graduate/Professional
School Name & Location				
Years Completed	4   5   6   7   8	9   10   11   12	1   2   3   4	1   2   3   4
Diploma/Degree				

Indicate any foreign Languages you can speak, read and/or write or if you can sign.

	Fluent	Good	Fair
Speak			
Read			
Write			
Sign			

**Describe any specialized training, apprenticeship, skills and extra-curricular activities.**


**Describe any job-related training received in the United States military.**


**References**

Name	Telephone Number
Address	
Name	Telephone Number
Address	
Name	Telephone Number
Address	

Person to notify in case of emergency: \_\_\_\_\_ Phone # \_\_\_\_\_

# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

**If you need additional space, please continue on a separate sheet of paper.**

**List professional, trade, business or civic activities and offices held.**

*You may exclude membership that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.*


# Applicant's Statement

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I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should enquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I understand that the facility will conduct a criminal and or child or adult abuse records check in this state or any other state as required by the law.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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## FOR PERSONNEL DEPARTMENT USE ONLY

Remarks: \_\_\_\_\_

Hired:  Yes  No Date Employed: \_\_\_\_\_

\_\_\_\_\_  
Date Interviewed

Position Hired for: \_\_\_\_\_ Hourly/Salary: \$ \_\_\_\_\_ Dept.: \_\_\_\_\_

\_\_\_\_\_  
Signature of Interviewer or Director of Human Resources

\_\_\_\_\_  
Date

### NOTES:

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