



House Parent Couple Application

Thank you for your interest in joining our team! We look forward to learning about you!

Please answer all questions completely and clearly, following all instructions. If an item is not applicable, enter "NA." Resumes will be accepted for additional information but not in place of an application. Sign the completed application. If applying online, a signed application will be obtained prior to employment. Please print neatly or type.

Personal Information			
Applicant 1		Today's Date: _____	
Last Name	First Name	Middle Initial	
Street Address	City	State	Zip Code
Phone Number	E-Mail Address		
Driver's License Number	State	Social Security Number	
Are you at least 21 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you legally eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<small>(Proof of eligibility to work in the US will be required upon employment)</small>			
Applicant 2		Today's Date: _____	
Last Name	First Name	Middle Initial	
Street Address	City	State	Zip Code
Phone Number	E-Mail Address		
Driver's License Number	State	Social Security Number	
Are you at least 21 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you legally eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<small>(Proof of eligibility to work in the US will be required upon employment)</small>			
How long have you been married? _____			

Name	Relationship	Sex	Date of Birth

Relatives and Friends (both applicants)

Do you have any relatives or friends that are currently part of Amarillo Children’s Home Team? Yes No

Name	Relationship	Name	Relationship

EDUCATION: Did you graduate from high school? Yes No If No, do you have a GED? Yes No

College-University-Trade Granted Major Areas of Study Semester Hours Type of Degree
 Business-Correspondence School

LANGUAGES:

Please list any languages other than English that you speak fluently.

MILITARY SERVICE:

Branch of Service	Dates of Service	Type of Discharge	Are you in the Active Reserve?

SKILLS AND TRAINING:

Please list any skills, abilities or specialized training which you possess and feel would benefit you being a part of the team at Amarillo Children’s Home.

HOBBIES AND INTERESTS:

Please share with us any hobbies, interests or passions that you enjoy on a regular basis.

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

Are you currently employed? Yes No If so, may we contact your employer? Yes No

On what date would you be available to join our team? _____

Please list people whom you have known for **at least one year** and who have knowledge of your character, experience and abilities. Do not include relatives.

Name	Address	Phone Number	How long have you known them?

Please list your faith orientation _____

Have you previously applied to be part of the team at Amarillo Children's Home? Yes No

If yes,
When? _____ What position? _____

Since your 18th birthday have you been arrested or convicted of a violation of the law other than a traffic ticket? If so, please explain below:

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?
 Yes No If yes, describe nature of offense and the penalty or disposition of the case or cases:

Driving Record. Have you had any moving violations or accidents within the last three years? If so, please list the number of tickets received and the number of accidents.

Please share with us some of the reasons you are looking to become a member of the team at Amarillo Children's Home and what you feel makes you a unique candidate.

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

I authorize the investigation of all information contained in this application for employment as may be necessary in arriving at an employment decision. I understand that all job and personal references will be checked, and I authorize (unless I have specifically noted otherwise on the application) the release of information by my current and past employers and personal references without liability to any person or company releasing such information.

I understand that a criminal background check will be conducted as part of my pre-employment qualification and that information obtained from background checks will be a factor in the hiring decision. I understand and acknowledge that, in order to be hired, I must pass a drug screening test and must be found to be free of tuberculosis as a condition of my employment. I further acknowledge that I will comply with any additional pre-employment screenings or testing that may be necessary for AMARILLO CHILDREN'S HOME to conduct in order to comply with regulatory or internal guidelines.

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.

Signature of applicant

Date

E-Verify Notice: Amarillo Children's Home participates in E-Verify and provides the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9, *Employment Eligibility Verification*, to confirm work authorization. Information is submitted through E-Verify after an offer of employment is made and accepted, and the E-Verify process is never used to pre-screen or discriminate against applicants. For more information on E-Verify, you may contact DHS at 888-897-7787 or www.dhs.gov/E-Verify.

Applicant #2, Continue to Next Page

EDUCATION: Did you graduate from high school? Yes No If No, do you have a GED? Yes No

College-University-Trade Granted
Business-Correspondence School

Major Areas of Study

Semester Hours

Type of Degree

Please list any languages other than English that you speak fluently.

Branch of Service

Dates of Service

Type of Discharge

Are you in the Active Reserve?

--	--	--	--

Please list any skills, abilities or specialized training which you possess and feel would benefit you being a part of the team at Amarillo Children's Home.

Please share with us any hobbies, interests or passions that you enjoy on a regular basis.

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

From: _____ To: _____ Job Title: _____ Salary: _____

Employer: _____ Address: _____

Description of work: _____

Immediate supervisor: _____ Phone # _____

Reason for leaving: _____

Are you currently employed? Yes No If so, may we contact your employer? Yes No

On what date would you be available to join our team? _____

Please list people whom you have known for **at least one year** and who have knowledge of your character, experience and abilities. Do not include relatives.

Name	Address	Phone Number	How long have you known them?

Please list your faith orientation _____

Have you previously applied to be part of the team at Amarillo Children's Home? Yes No

If yes,
When? _____ What position? _____

Since your 18th birthday have you been arrested or convicted of a violation of the law other than a traffic ticket? If so, please explain below:

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?

Yes No If yes, describe nature of offense and the penalty or disposition of the case or cases:

Driving Record. Have you had any moving violations or accidents within the last three years? If so, please list the number of tickets received and the number of accidents.

Please share with us some of the reasons you are looking to becoming a member of the team at Amarillo Children's Home and what you feel makes you a unique candidate.

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

I authorize the investigation of all information contained in this application for employment as may be necessary in arriving at an employment decision. I understand that all job and personal references will be checked, and I authorize the release of information by my current and past employers and personal references, unless specifically noted otherwise on the application. I understand that a criminal background check will be conducted as part of my pre-employment qualification and that information obtained from background checks will be a factor in the hiring decision.

I understand and acknowledge that, in order to be hired and as a condition of employment, I must pass a drug screening test and I must be found to be free of tuberculosis. I further acknowledge that I will comply with any additional pre-employment screenings or testing that may be necessary for Amarillo Children's Home to conduct in order to comply with regulatory or internal guidelines.

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.

Signature of applicant

Date

We are an Equal Opportunity Employer: We do not discriminate in regards to race, color, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

E-Verify Notice: Amarillo Children's Home participates in E-Verify and provides the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9, *Employment Eligibility Verification*, to confirm work authorization. Information is submitted through E-Verify after an offer of employment is made and accepted, and the E-Verify process is never used to pre-screen or discriminate against applicants. For more information on E-Verify, you may contact DHS at 888-897-7787 or www.dhs.gov/E-Verify.