

NEW HORIZONS/ UNLIMITED HORIZONS  
4904 ELIZABETH STREET  
TEXARKANA, TEXAS 75503  
**EMPLOYMENT APPLICATION**

903-794-0509

PRINT IN BLACK INK OR TYPE. Resumes will be accepted, but not in place of completed application. The application will not be considered unless it is signed and all questions are answered.

**I. PERSONAL DATA:**

DATE: \_\_\_\_\_

NAME: LAST FIRST MIDDLE INITIAL SOCIAL SECURITY NUMBER

ADDRESS: (NUMBER, STREET, APARTMENT #) CITY STATE ZIP CODE

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

DRIVER'S LICENSE NUMBER: \_\_\_\_\_ STATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

(Complete only for jobs requiring driving)

**II. GENERAL INFORMATION:** TITLE(S) OF POSITION(S) AND POSITION NUMBER(S) YOU ARE APPLYING FOR:

HAVE YOU PREVIOUSLY APPLIED HERE?  YES  NO HAVE YOU PREVIOUSLY WORKED HERE?  YES  NO

DO YOU HAVE ANY RELATIVES WORKING AT THIS COMPANY?  YES  NO

IF YES, LIST NAME(S) AND RELATIONSHIP(S): \_\_\_\_\_

**III. WORK PREFERENCE & AREAS OF EXPERIENCE:**

EARLIEST DATE YOU ARE AVAILABLE FOR EMPLOYMENT: \_\_\_\_\_ PAY RATE EXPECTED: \_\_\_\_\_

WILL YOU CONSIDER?  DAY SHIFT ONLY  EVENING SHIFT  NIGHT SHIFT  ANY SHIFT  
 FULL-TIME EMPLOYMENT  PART-TIME EMPLOYMENT  TEMPORARY EMPLOYMENT

MAJOR AREAS OF EXPERIENCE:  MENTAL HEALTH  MENTAL RETARDATION  SUBSTANCE ABUSE  
 CASE MANAGEMENT  MANAGEMENT/ADMINISTRATION  CLERICAL/SECRETARIAL

OTHER (explain): \_\_\_\_\_

**IV. EDUCATION & SKILLS:**

HIGH SCHOOL DIPLOMA OR COMPLETED GED?  YES  NO

COLLEGE/UNIVERSITY CITY & STATE SEMESTER HOURS DEGREE EARNED MAJOR MINOR

TYPING SPEED \_\_\_\_\_ WORD PROCESSOR EXPERIENCE?  YES  NO SPREADSHEET EXPERIENCE?  YES  NO DATA ENTRY EXPERIENCE?  YES  NO

OTHER COMPUTER SKILLS (LIST SOFTWARE EXPERIENCE) \_\_\_\_\_

OTHER SKILLS: \_\_\_\_\_

V. LICENSE, REGISTRATION, OR CERTIFICATION: (If Applicable)

NAME OF PROFESSION OR TRADE \_\_\_\_\_ SPECIALTY \_\_\_\_\_  
GRANTED BY \_\_\_\_\_ STATE OF \_\_\_\_\_  
LICENSE NUMBER \_\_\_\_\_ LICENSE REGISTRATION VALID FROM \_\_\_\_ / \_\_\_\_ / \_\_\_\_ TO \_\_\_\_ / \_\_\_\_ / \_\_\_\_

VI. EMPLOYMENT HISTORY: List your employment history in reverse order (LAST JOB FIRST). If you attach a resume, you may elect to print "See Attached Resume" in the "Description of Duties" section; however, COMPLETE ALL OTHER INFORMATION for each previous position (i.e., title, salary, reason for leaving, etc.). As a minimum, include all employment for past five years, with emphasis on last two positions.

If you are currently employed, may we inquire with your present employer? \_\_\_\_\_ YES \_\_\_\_\_ NO

A. EMPLOYER: \_\_\_\_\_ POSITION TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ SALARY: BEGINNING \_\_\_\_\_ ENDING \_\_\_\_\_  
SUPERVISOR'S NAME & TITLE: \_\_\_\_\_ PHONE \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_  
DESCRIPTION OF DUTIES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. EMPLOYER: \_\_\_\_\_ POSITION TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ SALARY: BEGINNING \_\_\_\_\_ ENDING \_\_\_\_\_  
SUPERVISOR'S NAME & TITLE: \_\_\_\_\_ PHONE \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_  
DESCRIPTION OF DUTIES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. EMPLOYER: \_\_\_\_\_ POSITION TITLE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ SALARY: BEGINNING \_\_\_\_\_ ENDING \_\_\_\_\_  
SUPERVISOR'S NAME & TITLE: \_\_\_\_\_ PHONE \_\_\_\_\_  
REASON FOR LEAVING: \_\_\_\_\_  
DESCRIPTION OF DUTIES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

BUSINESS/PROFESSIONAL: List at least two persons who have knowledge of your previous work performance.

NAME

ADDRESS

CITY/STATE/ZIP

PHONE

PERSONAL: List at least two persons, other than relatives, who have known you a minimum of one year.

NAME

ADDRESS

CITY/STATE/ZIP

PHONE

STATEMENT ON PREVIOUS BACK INJURY AND FALSIFICATION STATEMENT

Any falsification or omission of pertinent information given in your application or at time of interview may result in non-consideration for hire and/or immediate discharge.

If you have had a previous back injury, do not take this position. Due to the heavy lifting requirement, there will be the possibility of re-injury to yourself or any resident you will be assisting. It is with great concern for your safety that the management of New Horizons informs you that this position DOES require heavy lifting.

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 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire 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 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

VIII.

I do hereby authorize New Horizons to investigate my background, education, and experience. I also authorize former employers, former supervisors, and other persons with knowledge of my background, education or experience to provide any and all information to New Horizons. I also authorize New Horizons to use my name to conduct a criminal conviction check through the Texas Department of Public Safety computer files and I understand that certain convictions can be cause for revocation of an employment offer.

Have you ever been convicted of any offense which is a felony, or involves any form of theft, or official misconduct, or any other act done knowingly contrary to justice, honesty, principles, or good morals?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain \_\_\_\_\_

I understand that my driving record will be checked because the position I am applying for may require driving at times. This includes driving a New Horizons vehicle or or personal vehicle for New Horizons business. Those who have a poor driving record will not be covered by New Horizons automobile liability insurance or automobile physical damage. If an employee is not insurable, and driving is required in the job, the employment will be revoked.

I understand that a physical examination may be required for my employment and I am willing to undergo such an exam, if requested, including drug screening. I understand that if the results of the exam indicate that I cannot perform essential parts of the job I was hired to perform, the offer of employment may be revoked. I also understand that a positive result on the drug screening test will cause an offer of employment to be revoked.

I understand and accept that if I am hired into a temporary or part-time position I may not be extended all New Horizons benefits.

I understand that New Horizons retains full rights to discharge any employee from employment at any time, either with or without cause. I further understand that nothing in New Horizons Employment Handbook, or other documents or correspondence should be interpreted as implying an employment contract or agreement exists between New Horizons and any employee.

I understand that if I am employed by New Horizons that I will serve an initial probationary period, during which my continued employment will be conditional.

I certify that the statements in this application are true and complete. I understand that any false or misleading statement may be sufficient grounds for my application being rejected or for discharge, if I am already employed by New Horizons.

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