

**GREAT BAY SERVICES**  
**23 Cataract Avenue, Suite 1**  
**DOVER, NH**  
**603-842-5344**  
[www.greatbayservices.org](http://www.greatbayservices.org)

**APPLICATION FOR EMPLOYMENT**

LAST NAME

FIRST NAME

MIDDLE INITIAL

ADDRESS *street*

*city*

*state*

*zip*

APPLICATION DATE

PHONE

EMAIL

Are you legally eligible for employment in the United States?

YES \_\_\_\_\_ NO \_\_\_\_\_

Do you possess a current driver's license?

YES \_\_\_\_\_ NO \_\_\_\_\_

**CONVICTIONS:** Have you ever been convicted of a crime (including misdemeanors, felonies, and arrest) which has not been annulled or expunged or sealed by a court?

YES \_\_\_\_\_ NO \_\_\_\_\_

Has an allegation of abuse and/or neglect ever been founded against you?

YES \_\_\_\_\_ NO \_\_\_\_\_

If so, please describe in full: *Please note that an affirmative answer does not necessarily mean immediate disqualification for the position available.*

**POSITION DESIRED** \_\_\_\_\_

SCHEDULE RESTRICTION *if any:* \_\_\_\_\_

FULL TIME \_\_\_\_\_

PART TIME \_\_\_\_\_

PER DIEM \_\_\_\_\_

TEMPORARY \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work?

**REFERRAL INFORMATION:**

How did you learn about us?

(Please circle)

Friend

Relative

Walk In

Job Posting

Advertisement (Specify) \_\_\_\_\_

Other (Specify) \_\_\_\_\_

Do you currently have relatives working at this organization?

Yes \_\_\_\_\_ NO \_\_\_\_\_

If so, please name: \_\_\_\_\_

**Equal Employment Opportunity:** Great Bay Services will not discriminate on the basis of age, race, color, sex, marital status, religion, familial status, sexual orientation, ancestry, national or ethnic origin, political affiliation, physical or mental disability, or veteran status in its employment practices including hiring, placement, upgrading, transfer or demotion, lay-off, termination, recruitment, advertising, treatment during employment, and compensation. Reasonable accommodation will be made for employees with disabilities pursuant to the Americans with Disabilities Act of 1993.

**EMPLOYMENT HISTORY****LIST MOST RECENT POSITIONS FIRST****Employer**

Supervisor Name

Employer Address

Phone

Employer City/State/Zip

Dates of Employment:

Start:

End:

Reason for leaving:

Position and Duties:

**Employer**

Supervisor Name

Employer Address

Phone

Employer City/State/Zip

Dates of Employment:

Start:

End:

Reason for leaving:

Position and Duties:

**Employer**

Supervisor Name

Employer Address

Phone

Employer City/State/Zip

Dates of Employment:

Start:

End:

Reason for leaving:

Position and Duties:

**Employer**

Supervisor Name

Employer Address

Phone

Employer City/State/Zip

Dates of Employment:

Start:

End:

Reason for leaving:

Position and Duties:

(Please attach an additional sheet to list additional employers)

I hereby authorize past employers to provide to Great Bay Services any information available concerning my past or current employment with your organization. I release past employers and their representatives from any liability for damages arising from said information. I understand that this information is confidential between Great Bay Services and the above named organization

**SIGNATURE** of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Your name while employed at above (if different): \_\_\_\_\_

**EDUCATION**

School Name, City and State	Major	# Years Attended	Degrees Received (Note if diploma or GED Received)
HIGH SCHOOL			
COLLEGE			
GRADUATE			
OTHER			

**LICENSE/CERTIFICATION/REGISTRATION**

List title, expiration date, serial number and issuing state or agency. If pending, when expected?

List any training received, hobbies or special skills helpful to job being sought:

Have you ever had any experience with developmentally disabled or other human services type work?

YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, how much? Describe responsibilities and the population you worked with:

**OTHER REFERENCES**

<b>Name:</b>	Phone #:	Email:
Address:	Relationship:	
<b>Name:</b>	Phone #:	Email:
Address:	Relationship:	
<b>Name:</b>	Phone #:	Email:
Address:	Relationship:	

