



YOUTH & FAMILY SERVICES

APPLICATION FOR EMPLOYMENT

YOUTH & FAMILY SERVICES

PO Box 2813

Rapid City, SD 57709-2813

Phone: (605) 342-4195 Email: yfshr@youthandfamilyservices.org

Youth & Family Services considers applicants for all positions without regard to race, color, religion, sex, national origin, age, marital, or veteran status, the presence of non-job related medical condition or disability, or any other legally protected status

PERSONAL

Please Print
Position Applying For: _____ **Date Available:** _____

Type of Employment Interested In: (Circle All That Apply) Full Time Part Time Substitute Any

Last Name: _____ First: _____ Middle: _____

Address: _____ City _____ State: _____ Zip: _____

Phone: Home () _____ Work () _____ Cell () _____

Email Address: _____

Have you ever been employed with YFS? Yes ___ No ___ Dates of employment: ___ to ___

Are you a Tobacco User? Yes ___ No ___ (Except use in prayer, as in American Indian ceremonies & offerings.)

Do you have a valid driver's license? Yes ___ No ___ If yes, please list your driver's license information.
 State _____ Number: _____

Do you have a Commercial Driver's License? Yes ___ No ___
 Class: A B C Endorsements: _____

How did you hear about this position? (Circle one) Rapid City Journal, SD Career Center, Job Fair,
 School (please name) _____ Other _____

EDUCATION AND TRAINING

Do you have a high school diploma or GED? Yes ___ No ___

Please circle highest year of education completed: 8 9 10 11 12 13 14 15 16 17 18 19 20

Name/Address Trade School/College/Graduate	Course of Study	# of Yrs Completed	Did you Graduate	Degree/Diploma

Special training/skills: _____

Please indicate level of ability to operate. **B** – beginner **I** – intermediate **A** – advanced

Personal Computer _____ Type by touch _____ 10-key _____ Fax/Copier _____ Other _____

Software: Word _____ Excel _____ Access _____ Power Point _____ Other _____

Applicants will be required to provide copies of Diploma/GED, Degree or Licensures/Certificates at time of interview (transcripts are accepted).

PLEASE GIVE ACCURATE, COMPLETE EMPLOYMENT HISTORY BEGINNING WITH PRESENT OR MOST CURRENT POSITION.
(This information does not need to be completed if included on an attached resume.)

EMPLOYMENT

Company Name: _____	Dates: From _____ To _____
Address: _____	Phone: _____
Name of supervisor: _____	Salary: _____
Job Title & Description of your work: _____ _____	
Company Name: _____	Dates: From _____ To _____
Address: _____	Phone: _____
Name of supervisor: _____	Salary: _____
Job Title & Description of your work: _____ _____	
Company Name: _____	Dates: From _____ To _____
Address: _____	Phone: _____
Name of supervisor: _____	Salary: _____
Job Title & Description of your work: _____ _____	
Company Name: _____	Dates: From _____ To _____
Address: _____	Phone: _____
Name of supervisor: _____	Salary: _____
Job Title & Description of your work: _____ _____	

We will contact the employers listed above unless you indicate otherwise on the line provided.

List other people who have knowledge of your qualifications. Do not repeat persons listed under employment.
(This information does not need to be completed if included on an attached resume.)

REFERENCES

Name & Address	Relationship	Position/Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant Initials _____



YOUTH & FAMILY
SERVICES

Application for Employment -- Continued

AUTHORIZATION FOR RELEASE OF INFORMATION FOR EMPLOYMENT

I expressly authorize Youth & Family Services to contact any of my prior employer(s) and character reference(s). I hereby release previous employers, references and Youth & Family Services from any and all liability arising from their giving the requested information about my employment history or me.

The undersigned hereby authorizes any state department of social services, law enforcement, and the Youth & Family Services Personnel Department or designee, to obtain and/or release any and all information regarding the social services, work, DOT mandated drug/alcohol testing if applicable, driving record, or criminal history of the undersigned applicant for consideration for employment. I understand that a prior conviction will not necessarily disqualify me.

Applicant Name (First, Middle, Last): _____ Other names used: _____

Position applied for: _____ Requires CDL? Yes No

Address: _____ City: _____ State: _____ Zip Code: _____

Social Security Number: _____ Phone Number: _____ Cell Phone: _____

Driver's License Number: _____ Issuing State: _____

Other states lived in prior to South Dakota: _____

Offense History

List below any violations for which you were convicted in a court of law and/or any minor traffic offense, including any substantiated child abuse or neglect. One or more convictions will not necessarily disqualify you from employment. The decision is based on a number of factors such as the duties of the job for which you are being considered, the seriousness of the offense of which you were convicted, your age at the time of the offense, rehabilitation efforts, the recency of the offense, etc. Please be complete.

OFFENSE	PLACE <i>(If you have no offenses to list, please note "none.")</i>	DATE	DISPOSITION (SENTENCE)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

To be Signed and Notarized During Interview

This information provided in this Application for Employment (and resume if applicable) is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

Dated this _____ Day of _____.

Printed Name of Applicant

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____.

Notary Public South Dakota: _____

(seal)

(Signature)

My Commission Expires: _____

For Office Use Only

Hiring Supervisor (Print): _____ Date _____

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Applicant Initials _____