

PO Box 359
Monticello, AR 71657
870-367-6825
www.advantageseak.org



Discovery Skills Center
Monticello 870-367-8475
Discovery Children's Center
Monticello 870-367-4333
Hamburg 870-853-0857
Star City 870-628-3097

APPLICATIONS ARE ONLY ACCEPTED FOR OPEN POSITIONS. THE POSITION THAT YOU ARE APPLYING FOR MUST BE STATED ON THE APPLICATION.

Dear Applicant,

Attached is the application packet that you must fill out and return. Although there is a place on the application to list references, you will need to attach three (3) letters of reference. The letters can be from former employers, community leaders, or personal acquaintances-someone who knows about your abilities.

Make sure that you list all experience and information that you feel will be helpful to the hiring officials in considering you for employment.

Please complete and sign all attached forms. If you are hired, the background checks will be run before you come to training. There will be a \$25 cash deposit required before running background checks. This will be refunded on your first check if the background check comes back clear and you do begin working.

Remember that in order to be considered for employment, you must complete the packet. Only complete packets will be considered for hire. Check off these items below before you return the application to the office.

NOTE: ALL JOBS REQUIRE A MINIMUM OF A HIGH SCHOOL DIPLOMA OR A GED

_____ Application

_____ 3 Letters of reference

Thank you for your interest in employment with Advantages of Southeast Arkansas, Inc.

Dr. Lynne Thompson	Jamaal Jones	Sandy Patrick	Trinia Isaac	James Sanders	Dr. Tim Simon	Susan Wishard
President	Vice President	Secretary	Member	Member	Member	Member

Advantages of Southeast Arkansas, Inc. is in compliance with Titles VI and VII of the Civil Rights Act and operates, manages, and delivers services without regard to age, handicap, sex, race, religion, color or national origin.





Advantages of Southeast Arkansas Employment Application



Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apt/Unit # City State Zip Code

Home Phone: () _____ Cell Phone: () _____ E-Mail Address: _____

Date Available: _____ Desired Salary: \$ _____

Position you are applying for: _____

Do you have a valid driver's license to operate an automobile in this state? Yes _____ No _____

Are you insurable to operate an automobile in this state? Yes _____ No _____ if no, explain below:

Have you lived in Arkansas for the last 5 years or longer? _____

Are you available to work nights? Yes _____ No _____ Are you available to work weekends & holidays? Yes _____ No _____

Are you a citizen of the United States? Yes _____ No _____

If no, can you submit verification of your legal right to work in the U.S.? Yes _____ No _____

Have you ever worked for this company? Yes _____ No _____

If so, when? _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, explain: _____

Have you ever been convicted of any type of theft or fraud? Yes _____ No _____

If yes, identify the crime for which you were convicted, the date of the conviction and the location of the court in which you were convicted. Please provide any details you feel are relevant. Conviction of a crime will not automatically disqualify you from consideration from employment, but will be considered as part of any overall evaluation of your qualifications.

Education

High School: _____ Address: _____

Did you graduate? Yes _____ No _____ Diploma: _____ GED: _____

College: _____ Address: _____

Did you graduate? Yes _____ No _____ Diploma: _____ GED: _____

Other: _____ Address: _____

Did you graduate? Yes _____ No _____ Diploma: _____ GED: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

Previous Employment

Company: _____ Phone: () _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? Yes _____ No _____

Company: _____ Phone: () _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? Yes _____ No _____

Company: _____ Phone: () _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? Yes _____ No _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. The company, in considering my application may verify the information set forth in this application and obtain background information where legal, relating to my background. I authorize all persons, schools, employers, companies', corporations, credit bureau registries, and law enforcement agencies to supply any information concerning my background.

I understand that this facility has a commitment to maintain an alcohol/drug free workplace and that the facility requires a drug screening test as part of its selections and hiring process.

I release Advantages and all persons and companies from any claims, liabilities, or damages from obtaining or furnishing information about me.

All employees of Advantages are required to submit to Child/Adult Registry and Criminal Background checks. Additionally, any employee who has a Waiver client placed in their home as an alternative placement will have all background checks computed on all individuals living in the home over the age of 18.

If this application leads to employment, I understand that false, misleading or omission of any information in my application or interview may result in my disqualification from consideration for employment, or if employed, my dismissal. I understand that this is not a contract, offer, or promise of employment and that if hired, I will be able to resign at any time for any reason. Likewise, the facility can terminate my employment at any time with or without cause. I further understand and agree that no employee or official of Advantages has any authority to alter the term of my "at will" employment through oral statements or promises in order to be binding on Advantages. Any agreement or promise that alters policy must be in writing and signed by the director.

If employed, I agree to abide by and comply with all of ADVANTAGES'S policies, procedures, and rules as provided in the Employee's Handbook.

Any conditional offer of employment by ADVANTAGES is subject to successful completion of all employment requirements including, but not limited to, verification of education, drug testing, and background checks.

I have read and understand and agree to the statements above.

Signature as shown on Social Security Card

Date