LIFE ADJUSTMENT CENTER, Inc. 1430 Broadway, Suite 501, New York, NY 10018

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination of race, creed, sex, age, origin, handicap or veterans status

PERSONAL

LAST NAME	FIRST	M.I.	Date	
STREET ADDRESS & /	APARTMENT #		Primary Telephone	
CITY, STATE, ZIP			Additional Telephone	
Have you ever been em	ployed with us?		Social Security #	
Desired position			Are you of the legal age to work?	
How did you hear about this position?			Are you available for overtime?	
Are you legally eligible for employment in the United States?			When are you available to begin working?	
Do you have any relatives or friends that work for the agency? If so, Who?			Do you have a Valid Driver License?	
Email Address				

EDUCATION

School	Name & Location	Major	Years completed	Degree/ Diploma
Graduate				
College				
MR/DD related courses				
High School				
Elementary				

PLEASE GIVE COMPLETE FULL-TIME & PART-TIME EMPLOYMENT HISTORY. START WITH YOUR MOST RECENT EMPLOYER

Company name	Telephone #			
Address	Start date & End date			
Address				
Name of Manager/Supervisor				
Job title and describe your work	Reason for Leaving			
May we contact this employer? Yes or No				
Company name	Telephone #			
Address	Start date & End date			
Name of Manager/Supervisor				
Job title and describe your work	Reason for Leaving			
May we contact this employer? Yes or No				
Company name	Telephone #			
Address	Start date & End date			
Name of Manager/Supervisor				
Job title and describe your work	Reason for Leaving			
May we contact this employer? Yes or No				
Have you ever held a position of trust(handling money or confidential mater	ial)?			
Priefly state why you desire to make a change in amployment?				
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Do you know of any reason why you would not be able to perform the access	atial functions of this job with or			
Do you know of any reason why you would not be able to perform the essential functions of this job with or				
without reasonable accommodations?				
Warling with the dischlod population requires workers with an	a sial qualifications			

Working with the disabled population requires workers with special qualifications. Write a brief summary as to why you think you are a good candidate to work with this special population.

AUTHORIZATION

I hereby grant permission to the Life Adjustment Center, Inc. to contact my present and/or former employers to verify my employment dates title, salary, and any other pertinent information relating to employment. Life Adjustment Center, Inc. may also contact educational institutions listed on my application for employment to verify my dates of attendance, certificates, diplomas or degrees awarded.

I understand that the information on my application for employment must be true, correct and complete. If employed by Life Adjustment Center, Inc. any misstatement or omission of fact on my application may result in my immedate dismissal.

No person shall be denied employment on the basis of race, color, ethnicity, national origin, sex/gender, sexual orientation, religion, creed, disability (including HIV status), age, veterans status, marital status or ex-offender status.

Effective April 1, 2005

All who apply for employment at the Life Adjustment Center are required to undergo Criminal History Record Checks.

Signature _____

DATE _____