

For Office Use Only

Hired _____

Starting Date _____

Starting Salary _____

Date _____

Position applied for _____

Safe Harbor Application for Employment

General Information:

Name _____
Last First Middle Initial

Address _____
Street City State Zip Code

Home Phone _____ Work Phone _____

Social Security Number _____ Date of Birth _____

Are you a United States Citizen? _____ Email _____

If not, what is your country of citizenship and what is your status in the United States?

Education Information: *Please indicate highest level of completion*

- High School/GED
 College/University

- Professional/Technical School
 Post Graduate Study

Major/Field of Study _____

Employment Information: *Begin record with most recent employment*

	Present/Most Recent Employer:	Previously Employed By:	Previous Employed By:
Name of Organization			
Supervisor			
Nature of Business			
Dates of Employment			
Position Held			
Ending Salary			
Reason for Leaving			

May we contact your present employer? _____

Professional References: *Please list two individuals whom you have a profession association with and to whom you are not related.*

1. Name: _____
Address: _____
Phone Number: _____
Title & Place of Employment: _____

2. Name: _____
Address: _____
Phone Number: _____
Title & Place of Employment: _____

Additional Information:

How did you hear about Safe Harbor?

Please summarize special skills and qualifications which you possess which promoted your interest in Safe Harbor. _____

Waiver of truth and permission for investigation

I certify that answers given herein are true and complete to the best of my knowledge. I authorize the staff of Safe Harbor to make such investigations and inquiries of my personal, employment, financial, medical or criminal history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, institutions of learning or persons from all liability in responding to inquiries in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of Safe Harbor.

Signature

Date

Job Application Disclaimer and Acknowledgment

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

I authorize any of the persons and organizations listed in this application to give you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.

In consideration of my employment, I agree to conform to the rules and regulations of the organization. I acknowledge that rules may be changed, withdrawn, added or interpreted at any time, at the organization's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself. I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to promise any other personnel action, either before or after I accept employment, or to guarantee any benefits or terms or conditions of employment or to make any other agreement which is contrary to this agreement.

I have read and understand this agreement.

Signature

Date

Confidentiality & Conduct Pledge

I understand that individuals using the programs and services of Safe Harbor are often involved in emotional, dangerous, or crisis situations, and may have suffered multiple forms of abuse. I realize the need for these individuals to be safe and in caring relationships that are free from fear of careless information sharing.

I agree to maintain a relationship of trust and privacy with all Safe Harbor clients. I agree to not divulge verbal or written information about clients, their situation, family, etc. to any individual or agency outside Safe Harbor. I will only disclose knowledge/information regarding Safe Harbor clients upon a signed Release of Information form from a client or by subpoena.

I also agree to conduct myself in a professional, responsible, and respectful manner in regard to fellow Safe Harbor employees, volunteers, and Board of Director members, keeping operation and business information within the confines of the agency.

I also agree to do nothing that would reflect negatively on Safe Harbor or harm its reputation. For cause, Safe Harbor reserves the right to immediately terminate this agreement.

By signing below, I am accepting the responsibilities involved with the aforementioned and understand that behavior to the contrary will result in consequences that include progressive disciplinary action.

Signature

Date