



# Visions Family Services, Inc.

408 S. Sycamore St.  
 Petersburg, VA 233805  
 P:804-732-4281  
 F:804-862-2644

## Employment Application

### Applicant Information

**Please read these instructions before you complete your application.**

Applications are only accepted for jobs that are currently open. Separate applications are to be submitted for each job sought. Be sure to list the title of the job you are applying for in the same way as it appears in the job announcement. Complete the entire application. Incomplete application will not be considered. Your complete application may be mailed, faxed or emailed (humanresources@visionsfamilyservices.org)

No person shall, on the grounds of race, color, national origin, sex age creed or handicapping condition be excluded from participation in, be denied benefits or, or otherwise be subjected to discrimination, in the provision of any care of services.

Department Interest:  Administration     Day Support     Mental Health  
 Nurse     Residential Group Home     Maintenance

Position: \_\_\_\_\_

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
 \_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_  
 (Home) (Cell)

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

For purposes of compliance with the Immigration Reform And Control Act, are you legally eligible for employment in the United States?  Yes,  No. Under the Immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

When will you be available to start work? (No date is necessary if you are available as soon as you give two (2) weeks' notice.)

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

Check which shift you will accept  Day,  Evening,  Night,  Rotating,  Weekends

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Special Qualification and Skills: (typing, shorthand, foreign language, publications, scholastic honors, etc.) \_\_\_\_\_

Typing speed \_\_\_\_\_ Words per minute. Shorthand speed \_\_\_\_\_ Words per minute.

## 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: \_\_\_\_\_

**For purpose of compliance with Section 2.10112 of the Code of Virginia, entitle Grad or Rating Increase and Other Preferences for Veterans, have you ever served in the Armed Forces of the United States during the following dates? (Check the appropriate dates:  World War I – 4/15/17 – 4/1/20;  World War II – 12/7/41 – 12/31/46;  Korean Conflict – 6/27/50 – 1/31/55;  Vietnam Conflict – 8/5/64 – 3/7/75;  None of the dates shown, but I did serve in the military.**

Use this space for any additional information you think would help us evaluate your application, including training, seminars, workshops, and special achievements of specialized skills. If you need additional space, add a separate sheet(s) of paper.

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**Licenses (to include driver's) certificates, or other authorization to practice a trade or profession.**

Type	License Number	Expiration Date	Granted by (licensing board)
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**Miscellaneous:**

If you need additional space, add a separate sheet(s) of paper.

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1. Are you able to fully perform the essential duties of the job for which you are applying: Yes, no  
If no, please describe: *(A disability will not bar you from employment if you are able to perform the essential duties of the job with reasonable accommodation.)*

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2. Have you ever been convicted of a law violation(s), including moving traffic violations but excluding offenses committed before your eighteenth birthday that were finally adjudicated in a juvenile court or under a youth offender law? Include convictions by general court martial while in the military service. Yes, No  
If yes, give date, place, charge, court and fine or sentence. *(A conviction does not automatically mean that you cannot be employed. What you were convicted of and how long ago are important. Give all facts so that a decisions can be made.)*

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3. Have you ever been fired or asked to resign from a job? Yes, No  
If yes, give name and address of employer and describe reason. *(A firing or forced resignation down not automatically exclude you from employment. The circumstances, time elapsed, and recent employment record will be considered.)*
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**Disclaimer and Signature**

I hereby certify that all statements made in this application are true and complete to the best of my knowledge. I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment opportunities with Visions Family Services, Inc. and I agree to hold VFS, INC. and persons named herein blameless in that event. I understand that all information on this application is subject to verification and I consent to references and former employers and educational institutions and licensing boards listed being contacted regarding this application. If offered employment, I further understand the employment offer will be subject to the results of a national fingerprint search. I further authorize the VFS, INC. to rely upon and use as it sees fit any information received from such contacts.

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

\*Please attach a clean copy of your resume

**To meet the requirements of federal regulations, we need to collect information on the questions below for record keeping purposes. This information will NOT be used for making employment decisions and will NOT be kept with your application for employment**

**Check the block for the racial or ethnic group with which you identify:**

- White (*includes Arabian*)
- Black (*includes Jamaicans, Bahamians and other Caribbean's or Africans but not Hispanic or Arabian descent*)
- Hispanic (*includes person of Mexican, Puerto Rican, Central/South American or other Spanish origin culture*)
- Asian & Asian American (*includes Pakistanis, Indians and Pacific Islanders*)
- American Indian (*includes Alaskans*)

**Check the block for the highest level of education completed (check only one):**

- Less than 8<sup>th</sup> grade
- Completed 8<sup>th</sup> grade
- Attended high school
- High School graduate/GED
- Attended college and/or associate degree
- College graduate
- Attended graduate school
- Master's Degree
- Graduate sturdy beyond masters requirements
- PhD or professional degree

**Check appropriate blacks:**

- Handicapped
- Male
- Female

Position applied for: \_\_\_\_\_  
Announcement number \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

**How did you find out about this employment opportunity:**

- Newspaper\*
- Virginia Employment Commission
- VFS Personnel Department
- Website
- Va. CSB Job Listings
- VFS employee
- Other (please specify)

\*Specify name of newspaper \_\_\_\_\_