



American Indian Changing Spirits

APPLICATION FOR EMPLOYMENT

WE APPRECIATE YOUR INTEREST IN AICS AND ASSURE YOU THAT WE ARE SINCERELY INTERESTED IN YOUR QUALIFICATIONS. A CLEAR UNDERSTANDING OF YOUR BACKGROUND AND HISTORY WILL HELP US CONSIDER YOU FOR A POSITION THAT MEETS YOUR OBJECTIVES AND THOSE OF AICS. **PRINT IN INK. FILL OUT APPLICATION COMPLETELY; DO NOT REFERENCE RESUME.**

PERSONAL

LAST NAME		FIRST NAME		INITIAL		SOCIAL SECURITY #		DATE			
PERMANENT ADDRESS				CITY		STATE		ZIP		TELEPHONE ()	
ARE YOU LESS THAN 18 YRS OF AGE? () YES () NO			DO YOU HAVE THE LEGAL RIGHT TO LIVE AND WORK IN THE U.S.? () YES () NO				OTHER NAME(S) UNDER WHICH YOU HAVE BEEN PREVIOUSLY EMPLOYED:				
NAME OF FRIENDS OR RELATIVES EMPLOYED IN THIS ORGANIZATION:											
HAVE YOU BEEN PREVIOUSLY EMPLOYED BY AICS? () YES () NO IF YES, GIVE DATES OF EMPLOYMENT:						HAVE YOU APPLIED TO THIS ORGANIZATION BEFORE? () YES () NO IF YES, GIVE DATE AND POSITION APPLIED FOR:					
HOW WERE YOU REFERRED TO AICS? () ADVERTISEMENT () OTHER COMPANY () AGENCY () EMPLOYMENT SERVICE () EMPLOYEE () SCHOOL () SELF () OTHER								NAME OF REFERRAL SOURCE:			

EMPLOYMENT INTEREST

POSITION DESIRED:			
TITLE		FACILITY	RECRUITMENT #
SECOND CHOICE:			
TITLE		FACILITY	RECRUITMENT #
TYPE OF EMPLOYMENT YOU ARE SEEKING: () FULL TIME () PART TIME () TEMPORARY () PER DIEM			DATE AVAILABLE
SHIFTS YOU CAN WORK: () DAY () SWING () NIGHT () WEEKEND			DO YOU HAVE REALIABLE TRANSPORTATION TO AND FROM WORK? () YES () NO
CAN YOU PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB APPLIED FOR? () YES () NO			

EDUCATION/U.S. MILITARY SERVICE

SCHOOL OR INSTITUTION	NAME AND ADDRESS OF SCHOOL	MAJOR	UNITS COMPLETED AND GRADE AVERAGE	DEGREES AND/OR DIPLOMAS
HIGH SCHOOL				
COLLEGE				
OTHER				
HONORS OR AWARDS RECEIVED:		PROFESSIONAL CERTIFICATES OR LICENSES HELD:	ARE YOU CURRENTLY TAKING ANY EDUCATIONAL COURSE? () YES () NO IF YES, WHAT AND WHERE?	
PLEASE INDICATE ANY FOREIGN LANGUAGES THAT YOU: SPEAK _____ READ _____ WRITE _____			PRESENT COMMUNITY AND PROFESSIONAL AFFILIATIONS, OFFICE HELD: (EXCEPT INFO WHICH MIGHT INDICATE SEX, RACE, RELIGION, AGE, NATIONAL ORIGIN, ANCESTRY, DISABILITY OR OTHER PROTECTED STATUS.)	
HAVE YOU EVER SERVED IN THE U.S. ARMED FORCES? () YES () NO			RANK HELD AT DISCHARGE:	
U.S. MILITARY DUTIES AND SPECIAL TRAINING:				

**AICS IS AN EQUAL OPPORTUNITY EMPLOYER
AICS CONSIDERS APPLICANTS WITH CRIMINAL HISTORY AS REQUIRED**

REFERENCES

LIST OF PEOPLE WE MAY CONTACT WHO ARE QUALIFIED TO EVALUATE YOUR CAPABILITIES (DO NOT INCLUDE RELATIVES)				TELEPHONE	OCCUPATION	YEARS KNOWN
NAME	ADDRESS	CITY	ZIP			

EMPLOYMENT HISTORY

GIVE EMPLOYMENT RECORD AS COMPLETELY AS POSSIBLE, INCLUDE CURRENT OR MOST RECENT EMPLOYER FIRST. SHOW UNEMPLOYED OR SELF-EMPLOYED PERIODS AND INDICATE DATES AND COMMENT ON EACH, INCLUDE PART TIME OR SUMMER WORK. YOU MAY USE EXTRA SHEETS FOR ADDITIONAL INFORMATION.

COMPANY NAME (CURRENT OR LAST)	ADDRESS	TELEPHONE ()	DATES EMPLOYED (MONTH/YEAR) FROM: TO:
JOB TITLE	SUPERVISOR'S NAME AND TITLE	TYPE OF BUSINESS	
DESCRIPTION OF DUTIES			REASON FOR LEAVING?
			MAY WE CONTACT THIS EMPLOYER? () YES () NO
COMPANY NAME (CURRENT OR LAST)	ADDRESS	TELEPHONE ()	DATES EMPLOYED (MONTH/YEAR) FROM: TO:
JOB TITLE	SUPERVISOR'S NAME AND TITLE	TYPE OF BUSINESS	
DESCRIPTION OF DUTIES			REASON FOR LEAVING?
			MAY WE CONTACT THIS EMPLOYER? () YES () NO
COMPANY NAME (CURRENT OR LAST)	ADDRESS	TELEPHONE ()	DATES EMPLOYED (MONTH/YEAR) FROM: TO:
JOB TITLE	SUPERVISOR'S NAME AND TITLE	TYPE OF BUSINESS	
DESCRIPTION OF DUTIES			REASON FOR LEAVING?
			MAY WE CONTACT THIS EMPLOYER? () YES () NO

ACKNOWLEDGEMENT

- I UNDERSTAND THAT ANY POSITION WHICH I MAY BE OFFERED WILL BE CONTINGENT ON SUCH FACTORS AS A BACKGROUND CHECK, HEALTH SCREENING, A DRUG SCREEN URINALYSIS AND THE FEDERAL I-9 EMPLOYMENT ELIGIBILITY VERIFICATION.
- ANY ACCEPTANCE OF EMPLOYMENT WILL BE PREDICATED UPON THE TRUSTFULNESS OF THE WRITTEN AND VERBAL STATEMENTS CONTAINED WITHIN THIS APPLICATION AND PRE-EMPLOYMENT PROCESS. I UNDERSTAND THAT SHOULD AICS FIND THAT ANY STATEMENT I HAVE MADE IS NOT TRUTHFUL, ANY JOB OFFER EXTENDED TO ME WILL BE WITHDRAWN AND IF EMPLOYED, I MAY BE SUBJECT TO DISMISSAL.
- I UNDERSTAND THIS EMPLOYMENT APPLICATION IS NOT TO BE CONSTRUED AS A GUARANTEE OF EMPLOYMENT FOR A SPECIFIC TIME. I FURTHER UNDERSTAND THAT EMPLOYMENT WITH BHS DOES NOT CONSTITUTE ANY FORM OF CONTRACT, IMPLIED OR EXPRESSED, AND ANY SUCH EMPLOYMENT WILL BE TERMINABLE AT WILL EITHER BY MYSELF OR AICS UPON NOTICE OF ONE PARTY TO THE OTHER. CONTINUED EMPLOYMENT IS DEPENDENT ON SATISFACTORY PERFORMANCE AND THE CONTINUED NEED FOR MY SERVICES AS DETERMINED BY AICS.
- I AUTHORIZE AICS TO MAKE ANY INVESTIGATION DEEMED NECESSARY FOR EMPLOYMENT CONSIDERATION AND PROMOTION WITHIN AICS.
- I GRANT AICS APPROVAL, AFTER MY TERMINATION OF EMPLOYMENT, TO RELEASE INFORMATION WHICH IT MAY DEEM APPROPRIATE REGARDING MY EMPLOYMENT WITH OR TERMINATION FROM THE ORGANIZATION, TO ANYONE WHO HAS A REASONABLE BASIS FOR MAKING SUCH INQUIRY. SO LONG AS THE INFORMATION DISCLOSED IS NOT KNOWN BY THE ORGANIZATION TO BE INACCURATE, THE ORGANIZATION SHALL NOT INCUR LEGAL LIABILITY OF ANY NATURE IN CONNECTION WITH THE FURNISHING OF SUCH INFORMATION.
- I ACKNOWLEDGE THAT I HAVE READ ALL OF THE ABOVE STATEMENTS AND THAT I UNDERSTAND THEM.

DATE: _____ SIGNATURE: _____