

A voice of hope. A voice in court. A voice for permanency.

4601 S. Loop 289, Suite 25 • Lubbock, TX 79424 Phone: (806) 763-2272 • Fax: (806) 763-2273 www.casaofthesouthplains.org

# **EMPLOYMENT APPLICATION**

# PLEASE READ BEFORE COMPLETING APPLICATION:

How did you hear about this job opening?

CASA of the South Plains, Inc. provides equal employment opportunities to all employees and applicants for employment. Please complete the application in its entirety. You must be at least 21 years of age to be considered for employment. You must submit this completed application via email to <a href="mailto:apply@casaofthesouthplains.org">apply@casaofthesouthplains.org</a> to be considered for employment. CASA of the South Plains Inc. has a **Zero Tolerance of Abuse Policy**. Please read the policy in its entirety at the bottom of the application before submitting.

APPLICANT INFORMATION				
LEGAL NAME				
First:	Preferred Name:	Middle:	Last:	
Other names used during prior employment (maiden name, other surname, etc.):				
-				
<b>CONTACT INFORM</b>	IATION			
Number & Street:	City:	State	e:	Zip Code:
Cell Phone:		Hom	e Phone:	
Email address:				
<b>POSITION INFORM</b>	IATION			
Position(s) Applying for:		Salary or Hourly	Expectations:	
Availability:		Available Start D	Date:	
Monday-Friday, 8am-5pr	n: Yes 🗌 No 🗌			

PERSONAL HISTORY
Are you a U.S. Citizen? <b>Yes</b> $\square$ <b>No</b> $\square$ Are you authorized to work in the U.S.? <b>Yes</b> $\square$ <b>No</b> $\square$
<b>NOTE:</b> If you are hired, you will be required to furnish proof of your employment eligibility.
List other cities, states, and/or countries where you have lived or worked within the past 7 years:
Have you ever been convicted of a felony? <b>Yes</b> $\square$ <b>No</b> $\square$
If yes, please provide details:
Have you ever been investigated for child abuse or neglect? Yes $\square$ No $\square$
If yes, please explain:
Have you ever been accused of being a pedophile or a child abuser? Yes \( \Dag{No} \)
If yes, please explain:
Have you ever been involved with or been accused of being a sex offender? Yes \( \bar{\text{No}} \)
If yes, please explain:
Ave year a wagistawa da ayyaffan dawa Was 🗆 Na 🖂
Are you a registered sex offender? <b>Yes</b> No
If yes, please explain:
<b>NOTE:</b> Prior to employment, all applicants will be investigated as to convictions for prior criminal offenses. A prior
conviction will not automatically disqualify an applicant for employment and will be considered only as it relates to the job
applied for. Criminal history (including guilty pleas, pleas of no contest, acceptance of deferred adjudication, and charges,
whether pending or not) involving a sex offense, violent act, child abuse or neglect, drugs, and related acts that would pose
a risk to children or the program's credibility regardless of whether the offense is classified as a felony or misdemeanor, and
any offense classified as a felony will exclude an applicant from becoming a CASA of the South Plains employee. Driving
While Intoxicated convictions (including guilty pleas and pleas of no contest) or charges may disqualify individuals from
positions involving driving.
Have you ever been licensed through a state employment or professional board? Yes 🗆 No 🗆
If yes, please list:
If yes, is your license in good standing? Yes 🗆 No 🗆
Were you ever subject to any disciplinary action from this board? Yes $\square$ No $\square$
If yes, please provide details:

EMPLOYMENT HISTORY				
Beginning with the most recent, list all employment <b>for the past 5 years</b> . Report all activities for the last 5 years, account for periods of unemployment, military service, schools, etc. To be considered for employment, all applicable blanks must be completed. Resumes may not be submitted in place of employment history but may be attached as a supplement to your application.				
Employer's Name (present or most recent position):	Supervisor's Name:			
Address:	Phone Number:			
Dates employed:				
Start (month/year):	End (month/year):			
Job Title:	Reason for Leaving:			
Briefly outline your major duties:				
Did this position include contact with children? Yes $\square$ No $\square$ If yes, please list number of children, age group, gender, and reason for contact:				
In this position did you manage staff? Yes 🗆 No 🗆 If yes, how many?				
In this position did you manage volunteers? Yes $\square$ No $\square$ If yes, how many?				
What did you like most about this job?				
What did you like least about this job?				
May we contact this employer? Yes $\square$ No $\square$				
Employer's Name:	Supervisor's Name:			
Address:	Phone Number:			
Dates employed:				
Start (month/year):	End (month/year):			
Job Title:	Reason for Leaving:			
Briefly outline your major duties:				

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If yes, please list number of children, age group, gende	er, and reason for contact:		
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In this position did you manage volunteers? Yes $\Box$ N	o ☐ If yes, how many?		
What did you like most about this job?			
What did you like least about this job?			
May we contact this employer? Yes $\square$ No $\square$			
Employer's Name:	Supervisor's Name:		
Address:	Phone Number:		
Dates employed:			
Start (month/year):	End (month/year):		
Job Title:	Reason for Leaving:		
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If yes, please list number of children, age group, gende	er, and reason for contact:		
In this position did you manage staff? Yes 🗆 No 🗆	If yes, how many?		
In this position did you manage volunteers? Yes $\Box$ N	o ☐ If yes, how many?		
What did you like most about this job?			
What did you like least about this job?			

Employer's Name:	Supervisor's Name:			
Address:	Phone Number:			
Dates employed:				
Start (month/year):	End (month/year):			
Job Title:	Reason for Leaving:			
Briefly outline your major duties:				
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In this position did you manage volunteers? Yes $\square$ No $\square$ If yes, how many?				
What did you like most about this job?				
What did you like least about this job?				
May we contact this employer? Yes \( \Dag{No} \)				
Employer's Name:	Supervisor's Name:			
Address:	Phone Number:			
Dates employed:				
Start (month/year):	End (month/year):			
Job Title:	Reason for Leaving:			
Briefly outline your major duties:				

May we contact this employer? Yes  $\Box$  No  $\Box$ 

•	s 🗆 No 🗆			
If yes, please list number of children, age group, ge				
and reactive received and reactive contract.				
In this position did you manage staff? Yes \( \text{No} \)	] If yes, how many?			
manago stam res in res				
In this position did you manage volunteers? <b>Yes</b> $\Box$	No ☐ If yes, how many?			
III tills position did you manage volunteers: <b>Tes</b> =	NO I yes, now many:			
What did you like most shout this ish?				
What did you like most about this job?				
What did you like least about this job?				
May we contact this employer? Yes \( \Dag{No} \)				
Please explain all gaps in employment during the p	ast 5 years:			
GENERAL EMPLOYMENT HISTORY				
Have you previously applied to work for or voluntee	er with CASA of the South Plains? <b>Ves</b> □ <b>No</b> □			
If yes, please list dates and outcome of your applic				
in yes, please list dates and outcome or your applic	ation.			
Llava va va va va via valva a valia dita va valvia a va valvata a	www.ith.com.oth.com.CACA.com.com.inoticom2.Woo			
Have you previously applied to work for or voluntee	r with any other CASA organization ? Yes 🗀 No 🗀			
	,			
If yes, please list organization's name, dates, and o	,			
If yes, please list organization's name, dates, and o	,			
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If yes, please list organization's name, dates, and o	,			
	outcome of your application:			
VOLUNTEER OR OTHER RELATED EXP	eutcome of your application:			
	outcome of your application:			
VOLUNTEER OR OTHER RELATED EXPl Organization's Name:	eutcome of your application:			
VOLUNTEER OR OTHER RELATED EXP	eutcome of your application:			
VOLUNTEER OR OTHER RELATED EXPl Organization's Name:  Type of Organization:	ERIENCE Supervisor's Name:			
VOLUNTEER OR OTHER RELATED EXPl Organization's Name:	eutcome of your application:			
VOLUNTEER OR OTHER RELATED EXPl Organization's Name:  Type of Organization:  Address:	ERIENCE Supervisor's Name:			
VOLUNTEER OR OTHER RELATED EXPlorganization's Name:  Type of Organization:  Address:  Dates of Service:	ERIENCE Supervisor's Name:  Phone Number:			
VOLUNTEER OR OTHER RELATED EXPl Organization's Name:  Type of Organization:  Address:	ERIENCE Supervisor's Name:			
VOLUNTEER OR OTHER RELATED EXPlorganization's Name:  Type of Organization:  Address:  Dates of Service: Start (month/year):	ERIENCE Supervisor's Name:  Phone Number:  End (month/year):			
VOLUNTEER OR OTHER RELATED EXPlorganization's Name:  Type of Organization:  Address:  Dates of Service:	ERIENCE Supervisor's Name:  Phone Number:			

Briefly outline your major duties:			
Did this volunteer role include contact with children? <b>Yes</b> \( \subseteq \textbf{No} \subseteq \) If yes, please list number of children, age group, gender, and reason for contact:			
In this volunteer role did you manage other volunteers? <b>Yes</b> \( \backslash \textbf{No} \( \Boxed \) If yes, how many?			
May we contact this organization? Yes 🗆 No 🗆			
Organization's Name:	Supervisor's Name:		
Type of Organization:			
Address:	Phone Number:		
Dates of Service: Start (month/year):	End (month/year):		
Volunteer Role:	Total Hours Served:		
Briefly outline your major duties:			
Did this volunteer role include contact with children? <b>Yes</b> \( \backslash <b>No</b> \( \subseteq \)  If yes, please list number of children, age group, gender, and reason for contact:			
In this volunteer role did you manage other volunteers? Yes \( \bar{\substack} \) No \( \Boxed{\substack} \) If yes, how many?			
May we contact this organization? Yes $\square$ No $\square$			
Organization's Name:	Supervisor's Name:		
Type of Organization:			
Address:	Phone Number:		
Dates of Service:			
Start (month/year):	End (month/year):		

Volunteer Role:	Total Hours Served:
Briefly outline your major duties:	
Did this volunteer role include contact with children?	Voc 🗆 No 🗆
If yes, please list number of children, age group, gende	
In this volunteer role did you manage other volunteers	? <b>Yes</b> $\square$ <b>No</b> $\square$ If yes, how many?
May we contact this organization? Yes ☐ No ☐	
Organization's Name:	Supervisor's Name:
Type of Organization:	
Address:	Phone Number:
Dates of Service:	
Start (month/year):	End (month/year):
Volunteer Role:	Total Hours Served:
Briefly outline your major duties:	
Did this volunteer role include contact with children?	Yes □ No □
If yes, please list number of children, age group, gende	er, and reason for contact:
In this volunteer role did you manage other volunteers	? <b>Yes</b> □ <b>No</b> □ If yes, how many?
May we contact this organization? Yes $\square$ No $\square$	
MILITARY SERVICE	
Discharge Date: Type of	Discharge:
<b>NOTE:</b> If you are hired, you will be required to furnish proof of an in	
List the dates (month/year) and Branch for all Active D Start Date: End Date:	Branch of Service:

EDUCATIONAL HISTORY			
High School Diploma Received From:	City and State:		
GED Certificate Received From:	City and State:		
List the Colleges, Universities, or Technical School	ols Attended:		
Educational Institution: Major:	oto Accondud.	Type of Degree	Date Received:
ADDITIONAL EXPERIENCES, SKILLS,	ACCOMPLISH	HMENTS, AND	AWARDS
Summarize special skills and/or qualifications yo	u have acquired fr	om employment or	other experience:
List any accomplishments, certifications, and/or	awards received:		
List any accomptionments, continuations, and/or	awarao rooonoa.		
NA//			0
Why do you want to work with an organization tha	it serves chilaren e	experiencing toster	care?
Other than through employment or volunteer expenses	erience listed abov	ve, how are you invo	olved with
children?			
List 3 strengths and 3 areas of growth for yourself	:		
Strengths:	Areas of Growth:		

REFERENCES				
Please provide 5 references, including <b>3 unrelated and 2 related</b> references whom you have known for at least 2 years.				
Name:	Relationship:	Occupation:	Phone Number:	How Long Known:
		_		

# **EMPLOYEE SCREENING POLICY**

#### ALL APPLICANTS FOR EMPLOYMENT ARE REQUIRED TO:

- Submit a completed Employment Application via email to <u>apply@casaofthesouthplains.org</u>. Resumes are also requested.
- Submit the names and contact information for three unrelated and two related references.
- Authorize CASA of the South Plains and provide the necessary information to secure the following record checks upon acceptance of job offer or as required by law:
  - Social security number verification;
  - Texas criminal record check obtained from the Texas Crime Information Center maintained by the Texas Department of Public Safety;
  - National criminal record check obtained from the National Crime Information Center (NCIC) maintained by the Federal Bureau of Investigations;
  - Texas Public Sex Offender Registry check maintained by the Texas Department of Public Safety;
  - National Sex Offender Registry check maintained by the United States Department of Justice;
  - The Child Abuse and Neglect Central Registry check maintained by the Texas Department of Family & Protective Services
  - O Texas Motor Vehicle check maintained by the Texas Department of Public Safety

Any applicant who does not agree to the application requirements will be eliminated from further consideration for employment.

## PRIOR TO HIRING ANY EMPLOYEE, CASA OF THE SOUTH PLAINS WILL:

- Conduct a thorough review of the applicant's written application and resume.
- Have at least one in-person interview.
- Contact each of the applicant's five references to ascertain appropriateness for the position.
- Receive verification of the applicant's education.
- Conduct all appropriate background checks.

Prior to employment, all applicants will be investigated as to convictions for prior criminal offenses. A prior conviction will not automatically disqualify an applicant for employment and will be considered only as it relates to the job applied for. Criminal history (including guilty pleas, pleas of no contest, acceptance of deferred adjudication, and charges, whether pending or not) involving a sex offense, violent act, child abuse or neglect, drugs, and related acts that would pose a risk to children or the program's credibility regardless of whether the offense is classified as a felony or misdemeanor, and any offense classified as a felony will exclude an applicant from becoming a CASA of the South Plains employee. Driving While Intoxicated convictions (including guilty pleas and pleas of no contest) or charges may disqualify individuals from positions involving driving.

#### ZERO TOLERANCE OF ABUSE POLICY

CASA of the South Plains does not tolerate any form of child abuse or exploitation, nor do we tolerate possession or access to any material that is abusive, or could be perceived as abusive, towards children. We take an active approach to eliminating

potential risks and creating a culture of safety. We will not knowingly engage with anyone who poses a risk to children. Any conduct that potentially places children at risk or violates CASA's Zero Tolerance of Abuse Policy will be promptly evaluated, resulting in dismissal from the program and notification of appropriate authorities.

#### **READ CAREFULLY BEFORE SIGNING**

I hereby certify that the statements made and answers given by me to the foregoing and following questions are true and correct and that there are no omissions of any kind whatsoever. I agree that any evasion, untruthful statement, answer, or omission shall be sufficient cause for discharge at any time. I hereby request and authorize the companies or persons shown under "Employment History" or other interested parties not necessarily named in the foregoing application to furnish CASA of the South Plains any information regarding my employment by them together with any information they may have regarding me, including motor vehicle records, military records, financial status, criminal record, and general reputation, and I hereby release such companies or person, CASA of the South Plains and its management from all liability, claims and damages in connection with the furnishing of such information. I further acknowledge that my employment may be terminated, and any offer or employment if such is made, may be withdrawn with or without cause, at the option of CASA or myself. I further acknowledge that the foregoing completed application form does not in any way constitute a contract of employment or payment of wages.

#### REFERENCE & BACKGROUND CHECK AUTHORIZATION

I hereby request and authorize all persons, schools, companies, credit bureaus, corporations, law enforcement agencies, and education institutions to furnish CASA of the South Plains with any information regarding my employment together with any information they may have regarding me, including motor vehicle records, military records, criminal records, and general reputation. This authorization to furnish information releases said organization(s) and individual(s) from all liability, claims, and damages in connection with the furnishing of such information.

## **EQUAL OPPORTUNITY EMPLOYMENT**

CASA of the South Plains, Inc. provides equal employment opportunities to all employees and applicants for employment without regard to race, color, religion, sex (including pregnancy, childbirth, and related medical conditions), gender, sexual orientation, gender identity or expression, national origin, age, genetic information, disability, military or veteran status or any other characteristic protected by federal, state, or local law. In addition to federal law requirements, CASA of the South Plains, Inc. complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

Printed Name		
Signature	Date	