

# Harwood Center, Inc.

711 Jefferson Avenue

Memphis, TN 38105

Phone: (901) 448-6580

Fax: (901)448-4734

## APPLICATION FOR EMPLOYMENT

Harwood Center does not discriminate on the basis of race, color, national origin, age, religion, disabilities or sex in its educational programs or employment.

**Please Print in Ink**

Name \_\_\_\_\_  
(Last) (First) (Middle)

Present Mailing Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Permanent Mailing Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone (\_\_\_\_) \_\_\_\_\_ Mobile/Beeper(\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Social Security Number \_\_\_\_\_

Are you a U.S. Citizen? Yes \_\_\_ No \_\_\_ If not, are you eligible to work in the U.S.? Yes \_\_\_ No \_\_\_

Have you ever been convicted or pled guilty or no contest to a violation of law other than a minor traffic violation? Yes \_\_\_ No \_\_\_  
(If yes, explain on back)

Are any criminal charges or proceedings pending against you? Yes \_\_\_ No \_\_\_ (If yes, explain on back)

Have you ever applied to this organization for a job before? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

Were you ever employed by this organization? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

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

Salary Desired: \$ \_\_\_\_\_

Status : FULL \_\_\_ PART TIME \_\_\_ SUMMER \_\_\_

SUBSTITUTE \_\_\_ UNIVERSITY STUDENT \_\_\_

Earliest start date: \_\_\_\_\_

How did you find out about Harwood Center? \_\_\_\_\_

**EMPLOYMENT HISTORY** (List chronologically and attach a sheet if necessary-account for all employment since high school or last ten years, whichever is less.)

EMPLOYER	TELEPHONE	FROM	TO	WORK PERFORMED
ADDRESS				
		STARTING SALARY	FINAL SALARY	
JOB TITLE				
REASON FOR LEAVING				SUPERVISOR
EMPLOYER	TELEPHONE	FROM	TO	WORK PERFORMED
ADDRESS				
		STARTING SALARY	FINAL SALARY	
JOB TITLE				
REASON FOR LEAVING				SUPERVISOR
EMPLOYER	TELEPHONE	FROM	TO	WORK PERFORMED
ADDRESS				
		STARTING SALARY	FINAL SALARY	
JOB TITLE				
REASON FOR LEAVING				SUPERVISOR
EMPLOYER	TELEPHONE	FROM	TO	WORK PERFORMED
ADDRESS				
		STARTING SALARY	FINAL SALARY	
JOB TITLE				
REASON FOR LEAVING				SUPERVISOR

**EDUCATIONAL AND PROFESSIONAL TRAINING** (List chronologically)

Level of Education	Name	State	Area of Study	Type of Degree	Year of Graduation	Dates Attended
High School						
College or University						
Graduate School						
Other						

**REFERENCES** - Please give the name, address and telephone number of at least three **PROFESSIONAL REFERENCES** other than relatives.  
**All references must include a current, correct address, and telephone number and email if available.**

Name of Reference	Mailing Address including Zip	Telephone & email

**CERTIFICATION**

If you have been issued a Tennessee certificate, please submit a photocopy. Copy enclosed: Yes\_\_\_ No\_\_\_

Type of Tennessee Certificate \_\_\_\_\_

Endorsement (s) \_\_\_\_\_

**APPLICANT’S STATEMENT**

**Please read carefully before signing**

I certify that the information given by me in this application is true and complete. I understand and agree that any false information, misrepresentation, or concealment of fact is sufficient grounds for either my immediate discharge without recourse or refusal of employment by Harwood Center.

I understand and agree that all information in this application may be verified by Harwood Center. I hereby authorize all individuals and organizations named or referred to in this application to give Harwood Center all information relative to my employment, work habits, and character and hereby release such individuals, organizations and Harwood Center from any liability for any claim or damage which may result.

This application for employment shall be considered active for a period of time not to exceed 45 days. At the conclusion of that time, if I have not heard from Harwood Center and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If, I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and Harwood Center reserves that same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law.

I understand that neither this document nor any offer of employment from the employer constitutes or is intended to create an employment contract unless a specific, separate written document to that effect is executed by the duly authorized board representative.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard. I also understand that all new personnel are subject to fingerprinting and background checks as required by the State of Tennessee Department of Human Services.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Harwood Center**  
**Applicant's Reference Release Forms**  
**All Applicants must sign and date all of the statements below and return with**  
**the completed application.**

**To Whom It May Concern:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I, the undersigned, request that the information requested on the Reference Information Form be released to the Harwood Center. I understand, and agree, that this information will be treated as confidential by the Harwood Center and will not be available to anyone other than authorized personnel employed by this program.

**Applicant's Signature:** \_\_\_\_\_

**To Whom It May Concern:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Applicant's Signature:** \_\_\_\_\_

## APPLICANT WAIVER

I am applying for employment with the following employer, **HARWOOD CENTER, INC.**

By Signing this waiver, I am agreeing to the release of any and all of my criminal history that may be in the TBI and FBI criminal databases.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date