



Applicant Information - Instructions

- Please Read The Following Information Before Completing Application For Employment.
- **HR Office Hours:** 8-5 am, Monday-Friday
- The following forms are part of the application process and are in your application for employment, complete these forms and turn them in with your application:
 - Drug Free Workplace Form
 - Application Disclosure & Authorization Form
 - Job Description Acknowledgement Form
 - Applicant Statistical Information Form
 - Shift Availability Form
- A benefits summary sheet is available upon request.
- Refer to the vacancy information in HR and/or on the bulletin board for a brief description of the position for which you are applying. Information will include salary and shift information.
- On the application for employment, there is a section “Position applying for”. Be specific and identify the exact title of the position, for example, Direct Care, Trainer.
- If you are called for an interview, be prepared to submit the following information:
 - **3 Professional Letters of Reference**
 - **Evidence of employment eligibility (i.e., drivers license, social security card, birth certificate)**
 - **Proof of education (i.e., high school diploma, GED certification, college transcripts)**
- When a conditional offer of employment is offered, you will be required to undergo and pass a drug test, criminal background check, and take a TB Test. You will be required to pay for the cost of the TB Test (\$19.00).
- Child-Care Licensing Background checks include a “fingerprint-based criminal history check” effective June 1, 2008, “if the applicant lived outside Texas during the previous 5 years...” You will be required to pay for the cost, \$44.20.
- **HR** will contact you if you are selected to participate in the interview process. Results of the interview process will be communicated by phone or letter.



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EDUCATIONAL BACKGROUND

Name and Location	Years Completed	Did You Graduate?	Course of Study
<input type="checkbox"/> High School <input type="checkbox"/> G.E.D. City, State			
College City, State			
Other City, State			

Summarize additional training (e.g., in-company courses, military schools, correspondence course, etc.):

Special licenses or certificates you possess: _____

List any special skills or qualification you possess: _____

If you worked during high school and college, indicate types of jobs you held: _____

In what high school/college extra curricular activities did you participate? _____

Scholarships, academic honors won: _____

MILITARY EXPERIENCE

Please indicate any military experience you have had.

Branch

From

To

Schools/Certificates/Training

Highest Rank Achieved

EMPLOYMENT HISTORY

List the last 8-10 years of employment history starting with the most recent.

Employer	Telephone ()	<u>Dates Employed</u>	Summarize the nature of the work performed and job responsibilities
Address		From: _ / _ / _ To: _ / _ / _	
Job Title		Hourly Rate/Salary <u>Starting</u>	
Immediate Supervisor and Title		\$ _____ Per _____.	
Reason for Leaving		Hourly Rate/Salary <u>Ending</u>	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ Per _____.	

Employer	Telephone ()	<u>Dates Employed</u>	Summarize the nature of the work performed and job responsibilities
Address		From: _ / _ / _ To: _ / _ / _	
Job Title		Hourly Rate/Salary <u>Starting</u>	
Immediate Supervisor and Title		\$ _____ Per _____.	
Reason for Leaving		Hourly Rate/Salary <u>Ending</u>	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ Per _____.	

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May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ Per _____.	

Employer	Telephone ()	<u>Dates Employed</u>	Summarize the nature of the work performed and job responsibilities
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Job Title		Hourly Rate/Salary <u>Starting</u>	
Immediate Supervisor and Title		\$ _____ Per _____.	
Reason for Leaving		Hourly Rate/Salary <u>Ending</u>	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ _____ Per _____.	

Will you receive a satisfactory reference from your current and all previous employers? Yes No
If "no," please explain. _____

Have you ever been discharged or asked to resign by an employer? Yes No
If "yes," please explain. _____

Comments (including explanation of any gaps in employment): _____

Answer these questions ***only*** if applying for a position that requires driving (see job description).

Do you have a valid driver's license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what state? _____		
Are you 21 or older?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a clear driving record?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Mission Road Ministries will conduct a *Motor Vehicle Registration* check for all applicants and/or employees who will be a driver for MRM.

I hereby authorize Mission Road Ministries to check and verify all statements obtained in this application. I further understand that any misrepresentation or omission of facts presented in this application for employment may result in my not being hired, or, if hired, may result in my dismissal.

I understand and agree that if I am employed; my employment will be for an indefinite period of time. I have received no promises or guarantees as to how long MRM will employ me. I understand and agree that if employed, I can quit at any time for any reason or no reason at all and that my employment may be terminated by MRM at any time for any reason or no reason at all. I further understand and agree that this employment-at-will relationship cannot be altered or changed except by an express written document signed by myself and the President/CEO and/or Board of Directors of MRM.

The application is current for only 60 days. If at the end of this time I still wish to be considered for employment, it will be necessary for me to complete a new application.

Signature

Date

Do Not Write Below Line -- For Human Resources Use Only

• **Job Description Acknowledgement** **Position Apply For:** _____

After reviewing the job description (attached or provided), please state whether you are able to perform all the essential duties outlined in the job description.

Yes, I read the job description. I am able to perform all of the essential duties of this position, to include, if applicable, lifting, standing, walking, climbing, stooping, kneeling, crawling, etc.

No, I read the job description. I am not able to perform all of the essential duties of this position.

If you are not able to perform all of the essential duties outlined in the job description, please list those elements and whether you could perform them with reasonable accommodation.

Name (please print): _____ Date: _____

Signature: _____

• **ESSENTIAL JOB DUTIES--PHYSICAL DEMAND ACKNOWLEDGEMENT**

If you are applying for a **direct care position**, this acknowledgement applies to you.

If you are hired for a direct care position, you may be involved in the following:

1. Restraining disruptive residents to prevent injury to themselves and other others by using MRM prescribed methods.
2. Transporting and/or assisting with transporting residents to and from activities, etc.
3. Training.

Yes, I read the job description. I am able to perform all of the essential duties of this position, and meet the physical demands for the position, to include lifting up to 75 lbs, standing, walking, climbing, stooping, kneeling, crawling, etc.

No, I read the job description. I am not able to perform all of the essential duties of this position.

If you are not able to perform all of the essential duties outlined in the job description, please list those elements and whether you could perform them with reasonable accommodation.

Name (please print): _____ Date: _____

SIGNATURE: _____

Additional Applicant Information—Application For Employment Addendum

Applicant Name: _____
(Please Print)

Please list your addresses in the past 5 years (include Apt Number, City, State and Zip Code):

1. _____
2. _____
3. _____
4. _____
5. _____

What has prepared you for the position for which you are currently applying?

References

	Address (City, State, Zip Code)	Daytime Phone Number	How Long Have You Know This Person?
Personal			
Professional			
Family Member			

Volunteer Experience

Organization	Duties and Time Frame	Contact Person and Phone Number

Have you ever been accused of physically, sexually or emotionally abusing a child or an adult?

() Yes () No If yes, please explain _____

Mission Road Ministries

Values Assessment

Do you know the work values you most want in a job and an employer?

People expect to achieve certain ideals from their jobs, employers and careers. Workplace values, concepts and ideas that you hold dear have a direct impact on your satisfaction with your job, with your career and even with your life.

When you understand the values you cherish most highly, you can make an evaluation about whether Mission Road Ministries supports those values.

Please review Mission Road Ministries' values:

- Faith
 - Family
 - Integrity
 - Respect
 - Teamwork
- } **Mission Road Ministries' Core Values**
- Keeping Employees and Clients Safe
 - Recognition, Being Valued
 - Change—Working Towards a Common Goal
 - Physical Challenge/Physically Demanding
 - Opportunity for Balance Between Work Life and Family Life
 - Order and Structure
 - Having a Positive Impact on Others and Society
 - Variety and a Changing Workplace
 - Professional Development, On-going learning and growth
 - Friendships and Warm Working Relationships
 - Deadlines, Pressure Challenges
 - Commitment to our Clients

How well do your core values fit with your current job, career path?

After reviewing our values, do you want to continue with Mission Road Ministries' employment process? ()
yes () no

Applicant Signature: _____ Date: _____

Mission Road Ministries
APPLICANT STATISTICAL INFORMATION

The following statistical information is for *statistical purposes only* and will remain separate from your application for employment.

Application Date: _____ **Date of Birth:** _____

Sex: Male Female

Race and Ethnic Identification:

Hispanic or Latino – a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race

White (not Hispanic or Latino) – a person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Black or African American (not Hispanic or Latino) – a person having origins in any of the black racial groups of Africa

Native Hawaiian or Other Pacific Islander (not Hispanic or Latino) – a person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands

Asian (not Hispanic or Latino) – a person having origins in any of the original peoples of the Far east, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

American Indian or Alaska Native (not Hispanic or Latino) – a person having origins in any of the original peoples of North and South American (including Central America), and who maintain tribal affiliation or community attachment

Two or More Races (not Hispanic or Latino) – all persons who identify with more than one of the above five races

Position Applied For

- Direct Care/Team Leader Maintenance Technician
 QMRP/Case Manager Other: _____

Referral Source

- Walk-in College Placement Office
 Texas Workforce Commission Current MRM Employee
 Express News Newspaper Other Newspaper _____
 Internet, MRM Website MRM Job Line I am a Former MRM Employee
 Other: _____

DRUG FREE WORKPLACE

Mission Road Ministries is a drug free workplace. We do not tolerate the unlawful use, possession, sale, or transfer of drugs or narcotics in any manner in the workplace, in association with the workplace, during work time, or that would otherwise adversely affect MRM business. Further, employees shall not possess alcoholic beverages in the workplace or consume alcoholic beverages in association with the workplace or during work time. Employees shall not report to work with illegal drugs and/or alcohol in their bodies.

All prospective employees are tested prior to employment. Drug testing will be accomplished by using an Oral Screening method. This test will be conducted by a trained and certified Mission Road Ministries' employee, or their designee. MRM also reserves the right to use urinalysis or hair strand testing as provided by an independent laboratory. All specimen samples shall be collected with due regard to the privacy of the employee and in a manner reasonably calculated to prevent substitution or contamination of the sample.

Applicants/prospective employees will be provided an opportunity to provide any information that he or she considers relevant to the test, including identification of currently or recently used prescription or non-prescription medication, or other relevant medical information. The providing of information shall not preclude administration of the test, but shall be taken into account in interpreting any positive confirmed results.

Failure to submit to the drug screen will result in the job offer being rescinded.

If there is a positive result from the initial test run, then a second confirmation test will be conducted. This confirmation test will be conducted immediately and utilize the gas chromatography/mass spectrometry method. The GS/MS confirmation test will be sent to an outside laboratory. Pending the outcome of the confirmation test, all contingent job offers will be on hold.

If the confirmation test also yields positive results, the contingent job offer will be rescinded.

Applicants who disagree with the results of the confirmation test may, at their own expense, submit to a hair strand test. The applicant or prospective employee will be instructed where to report to have an independent laboratory conduct a hair strand test. The results of this test will be considered conclusive and final. If the test results are again positive, the previous actions will stand. If the hair strand test results are negative, then any pending job offers will stand (and MRM will reimburse for the cost of the test).

Applicants who test positive cannot apply again for a period of one year.

MRM also tests employees randomly, post accident, post leave, at promotion, and with reasonable suspicion. Failure to submit to a test is considered voluntary termination. A copy of the full policy will be provided at orientation or is available by request.

I have read and understand the above information. I understand that any job offers made to me will be contingent, among other things, upon the negative (clear) results of a drug screen. By signing below I agree to submit to the drug screening process as required.

Name (please print clearly)

Date

Signature

Applicant Availability

APPLICANT NAME: _____ **DATE:** _____

I would be available to work (check all that apply):

- | | |
|------------------------------------------------|----------------------------------------|
| <input type="checkbox"/> Mornings | 6-2 PM |
| <input type="checkbox"/> Afternoon | 2-10 PM, 4-12 midnight |
| <input type="checkbox"/> Overnight | Midnight to 8 AM |
| <input type="checkbox"/> Monday through Friday | 8-5 PM (occasional weekends, overtime) |

I am interested in working (check all that apply):

- | | |
|--------------------------------------|-------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Full – Time | 32 – 40 hours |
| <input type="checkbox"/> Part – Time | 00 – 31 hours |
| <input type="checkbox"/> Substitute | As Needed – Minimum 16 hrs. per pay period
(Applies to Direct Care, Trainer position <u>Only</u>) |

I can work weekends (*Note: Majority of the direct care shifts includes weekends*):

- Yes No

Location I am available to work at (check all that apply):

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <input type="checkbox"/> 8706 Mission Road, (South Side Area).
<u>Main Campus</u> : Administrative offices, Day Services,
Campus Homes: Bledsoe, McGregor, K Cottage,
Meadows, Ellison, Horse Creek. | <input type="checkbox"/> 13307 Los Indios (North east area)
Off-Campus Home Los Indios |
| <input type="checkbox"/> 460 Kopplow (South Side Area)
Off-Campus Home: Kopplow | <input type="checkbox"/> 3638 Sugar Hill (North west area)
Off-Campus Home: Sugar Hill |
| <input type="checkbox"/> 7618 Mocking Bird (Medical Center Area)
Off-Campus Homes: Mockingbird, Larkspur,
Sandpiper. | |
| <input type="checkbox"/> 7520 South Sea Lane (N. San Pedro Area)
Off-Campus Home: Mabee | |
| <input type="checkbox"/> 4951 Aspen View (Northeast Side Area)
Off-Campus Homes: Pryor, Coy, Vailcrest | |
| <input type="checkbox"/> 3163 Morning Trail (Northeast Side Area)
Off-Campus Home: Morning Trail | |
| <input type="checkbox"/> 131 Burr Road (Alamo Heights Area)
Off-Campus Home: Covenant | |
| <input type="checkbox"/> 1300 West Ave (Unicorn Center)
Off-Campus Location
Note: Will be moving to 4630 Hamilton-Wolfe
(Medical Center Area) | |

APPLICATION DISCLOSURE AND AUTHORIZATION FORM

DISCLOSURE

In connection with your application for employment, or during the course of your employment (if any), Mission Road Ministries may request and obtain a consumer report as a condition to offering you employment or for other employment purposes. As defined in the Fair Credit Reporting Act (FCRA), a consumer report may include information regarding your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, including, but not limited to, information regarding your employment history, income, education, licenses, consumer credit history, driving record, criminal record, and general public records history. This consumer report will be prepared by Group One, a “consumer reporting agency” as defined in the FCRA.

In connection with your application for employment, or during the course of your employment (if any), Mission Road Ministries may request and obtain an investigative consumer report as a condition of offering you employment or for any other employment purposes. As defined by the FCRA, an investigative report may include information regarding your character, general reputation, personal characteristics, or mode of living. Such information may be obtained through personal interviews with neighbors, friends, or associates of yours or others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the case of an investigative consumer report, you have the right to request, in writing, within a reasonable period of time after the receipt of this disclosure, a complete and accurate disclosure of the nature and scope of any investigative consumer report prepared by Group One at the request of Mission Road Ministries and a written summary of your rights under the FCRA. If an investigative consumer report is performed at a future date during employment, you will receive notice no later than three (3) days after the request is made to a consumer reporting agency indicating that such a report has been requested.

AUTHORIZATION

By signing below, I _____
(please print) First Middle Last

hereby voluntarily authorize Mission Road Ministries to obtain a consumer report and/or investigative consumer report about me from Group One and to consider such consumer report and/or investigative consumer report when making decisions regarding my application for employment at Mission Road Ministries.

Applicant’s Signature _____ Date _____

Applicant’s Other Last Names (Former, etc.): _____

Social Security Number _____ *Gender: _____

Texas Drivers’ License Number: _____ Texas ID Number: _____

*Date of Birth _____

** For verification purposes only; will not use for making a hiring decision*

(OVER)

List all of the counties (including city & state) you've lived in for the **last seven (7) years**...PRINT

City	State	County
1.		
2.		
3.		
4.		
5.		
6.		
7.		

RELEASE FORM

I hereby release and hold harmless Group One, their respective officers, employees, agents, representatives, affiliates, and all other persons, corporations, partnerships, associations, and entities from which Group One obtains its reports from any and all claims, demands, or liabilities arising out of or in any way related to the request, preparation, transmission, disclosure, and use of any consumer report and/or investigative consumer report made in connection with my application for employment.

I certify that I have received and executed a Disclosure and Authorization Form permitting Group One to obtain, prepare, and disclose a consumer report and/or investigative consumer report* on my behalf. I understand that I have the right to have my own legal counsel review this release form.

SIGNATURE

DATE

Please Print Name

A *consumer report* may consist of employment records, educational verification, licensure verification, driving history, previous addresses, and other public records relative to criminal charges. A credit report will not be requested unless it is deemed pertinent to the functions of the position for which you are applying.