

Date _____



**HIGH SKY CHILDREN'S
RANCH**

Application for Employment

High Sky is an equal opportunity employer. Qualified applicants for employment will be considered without regard to race, color, religion, sex, age, national origin, disability or Vietnam era status. High Sky prohibits harassment in the workplace. High Sky is a subscriber to Texas Workers' Compensation.

Name:		Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Other names under which you have been employed or attended school		E-mail address		
Address:		City	State	Zip Code
Phone Number:	Cell Phone Number	Social Security Number:	Driver's License Number and issuing state:	
Position Applied For:	Date You Can Begin Work:	Salary Desired:	Are You Willing to Work Overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Shift Preference <input type="checkbox"/> Day <input type="checkbox"/> Evening <input type="checkbox"/> Night		I Prefer <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Occasional <input type="checkbox"/> Temporary		

Have you worked for this organization previously? Yes No If yes, give dates of employment _____

Have you ever submitted an employment application to High Sky? Yes No If yes, when? _____

Do you have any relatives employed with High Sky? If yes, please list _____

What prompted you to apply for a position with us? (Ad, friend, etc.) _____

Have you ever plead guilty to or been convicted of any criminal offense, other than minor traffic citations? Yes No
If yes, provide information on criminal offense, date, location (city and state) and disposition _____

Have you ever had a criminal charge dismissed following probation, community service, counseling or the completion of other conditions set by a court (deferred adjudication or pretrial diversion)? Yes No If yes, provide information on criminal offense, date, location (city and state) _____

Are you currently serving probation, community service or fulfilling any other court directed conditions for any criminal offense? Yes No
If yes, provide information on criminal offense, current status and expected date of completion _____

Commission of a crime will not be an automatic bar to consideration for employment; however, applicants convicted of certain criminal offenses may be ineligible for employment under applicable Texas law.

Education	Names/Location of Schools	Number of Years Completed	Last Grade/Degree Completed	Major Subjects
High School				
College				
Graduate School				
Other				

Do you hold a current professional license for the position for which you are applying? Yes No

License _____ Issuing State / Organization _____ Expiration Date _____

Have you ever been denied a professional license for the position for which you are applying by any governmental authority or organization? If yes, please provide dates, location and circumstances _____

Has your professional license ever been suspended, restricted or revoked? Yes No If yes, provide information on action taken, date and circumstances _____

Complete if applicable

Typing Skills _____ wpm Computer Skills Yes No If yes, list software _____

Other equipment you can operate _____

Special skills and remarks (include anything which would be pertinent to consideration of your application) _____

References – Please read directions carefully

List your most recent position first, use additional sheets if necessary. Explain any periods of unemployment or time periods between times employed.

Company Name		Dates of Employment	
		From:	To:
Address	City	State	Zip
Telephone ()	Immediate Supervisor	<input type="checkbox"/> Hourly Rate or <input type="checkbox"/> Salary per _____ \$	
Position(s) Held		Reason(s) for Leaving or Seeking Other Employment	

Company Name		Dates of Employment	
		From:	To:
Address	City	State	Zip
Telephone ()	Immediate Supervisor	<input type="checkbox"/> Hourly Rate or <input type="checkbox"/> Salary per _____ \$	
Position(s) Held		Reason(s) for Leaving or Seeking Other Employment	

Company Name		Dates of Employment	
		From:	To:
Address	City	State	Zip
Telephone ()	Immediate Supervisor	<input type="checkbox"/> Hourly Rate or <input type="checkbox"/> Salary per _____ \$	
Position(s) Held		Reason(s) for Leaving or Seeking Other Employment	

Company Name		Dates of Employment	
		From:	To:
Address	City	State	Zip
Telephone ()	Immediate Supervisor	<input type="checkbox"/> Hourly Rate or <input type="checkbox"/> Salary per _____ \$	
Position(s) Held		Reason(s) for Leaving or Seeking Other Employment	

Comments regarding periods of unemployment _____

Have you ever been terminated or asked to resign by any employer? Yes No If Yes, provide employer, date and circumstances _____

Applicant Verification

I certify that all of the information on this application, exhibits and resumes submitted to High Sky is true, correct, and complete. I understand that false, misleading, incomplete or omitted information will result in the rejection of my application or, if hired, the termination of my employment. I authorize High Sky and its agents to confirm all information on this application, exhibits and resumes, to contact companies and institutions listed to obtain references and to investigate my suitability for employment. I agree to provide additional information if requested by High Sky or its agents. I authorize High Sky to conduct any investigation it deems necessary with respect to information supplied above. I authorize any former employer, present employer, school, college, university, credit or finance bureau, personal reference and/or any other person to give any information they may have concerning my employment, education, certification, licenses, character, criminal record, driving record, credit or other information of any kind or type. I hereby unconditionally release from all liability for any damage, whether caused directly or indirectly from giving or receiving this information or opinions, High Sky and any informant contacted whether named or unnamed.

High Sky Children’s Ranch Employment Application

High Sky is required to and will conduct a criminal record check under Texas Law. I understand that I will be ineligible for employment with High Sky if I have committed certain criminal offenses.

I understand that, if employed, I will be required to follow the personnel policies and rules of the organization and that infractions of such rules may lead to my discharge. I also understand that High Sky follows employment-at-will practices, and does not discriminate in employment based upon age, race, color, sex, national origin, physical or mental condition/disability, or veteran status. In the event of employment, I understand that any false or misleading information given in this information sheet or interview may result in discharge whenever discovered.

I understand that this employment application is not an offer of employment or employment contract, either expressed or implied, between High Sky and me. I understand that if hired, I may resign or be terminated by High Sky at any time without advance notice or requirement of cause. I acknowledge that any employment will be for an indefinite time period and that I have not been guaranteed continued employment. I also understand that no manager, supervisor, or other employee of High Sky has the authority to promise or guarantee continuing employment.

I acknowledge that I have read and understand the information set forth above.

Signature

Date

HIGH SKY CHILDREN'S RANCH

Criminal Conviction and Motor Vehicle Background Investigation ACKNOWLEDGMENT

I, _____, have read the Background Investigation policy as presented to me, and any questions which I may have had have been answered. I, therefore, fully understand its meaning and requirements and hereby agree that should I be offered employment with High Sky Children's Ranch, I will comply with it at all times during my employment. I agree to cooperate with the procedures for conducting a criminal conviction and motor vehicle background investigation. I affirm that all of the information provided by me which may be used in complying with the investigation is true and correct. I acknowledge that if any investigation reveals information that would bar employment, my employment will terminate immediately.

Applicant Initials

Substance Abuse and Drug Testing Policy ACKNOWLEDGMENT

I, _____, have read the Substance Abuse and Drug Testing Policy as presented to me and any questions which I may have had have been answered. I, therefore, fully understand its meaning and requirements and hereby agree to comply with it at all times during the interview process, and should I become an employee of High Sky Children's Ranch, during my employment.

Applicant Initials

I authorize High Sky Children's Ranch, and its designated representative to release any and all pre-employment or employment records including Criminal Conviction and Motor Vehicle Background Investigations, and my Drug Testing results to the Texas Workforce Commission, Equal Employment Opportunity Commission, Wage and Hour Board, or other entity to which I have made claim for benefits of any kind or made any type of claim, and to release to any federal or state agency.

The signature of applicant is required for consideration for employment. The signature of employee is required as a condition of employment. Nothing in this policy is intended to alter the Company's position of employment-at-will. The length of employee's employment at High Sky is for no specified period of time and employment may be terminated by the Company or by the employee at any time for any reason.

Signature

Date

Printed Name

Witness Signature

Date

Printed Name

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Applicant for Employment RELEASE OF EMPLOYMENT RECORDS

I, _____, hereby authorize High Sky Children's Ranch and its agents to investigate all facts contained in my application for employment with said Company, and authorize the release of any and all information by my present and past employers, wherever located, which may be required for a reference check. I further authorize all of my previous employers and current employer to give any and all information concerning my employment and any other pertinent information which said employers may have, personal or otherwise, and I release all parties from all liabilities for any damages which may result from furnishing of said information. I understand and agree that, if hired, my employment is for no definite period of time, and that I may be terminated at any time without prior notice. A copy of this release shall be as valid as the original.

Applicant Signature

Date

Printed Name of Applicant

Witness Signature

Date

Printed Name of Witness