



New Horizons Employment Application

Equal Employment Opportunity Statement: Employment decisions will be based on the principles of equal opportunity. All personnel actions (recruiting, hiring, training, promotion, compensation, etc.) are administered without regard to any characteristic protected by state, federal or local law, assuming said characteristic does not interfere with the performance of essential job functions. Reasonable accommodations will be made for disabilities and religious beliefs. Please inform us of any necessary accommodations to the application process.

Applicant Information

Full Name:	
Address:	
City / State / Zip:	
Phone Number:	
Email Address:	
Social Security Number:	
Position Applied For:	
Date of Application:	
Salary Expected:	

Work Availability & Status

Have you applied for a position with us before? (Yes/No, If yes, when):	
Have you ever been employed with us before? (Yes/No, If yes, when):	
Are you currently employed? (Yes/No):	
Are you currently on lay-off status and subject to recall? (Yes/No):	
On what date would you be available for work?:	
Are you available to work (Full-time/Part-time)?:	
Can you travel for work if necessary? (Yes/No):	
If so, what counties will you commit to working?:	
Exact DAYS/TIMES you are available:	
Are you legally permitted to work in the United States? (Yes/No):	
Are you 18 years of age or older? (Yes/No):	
Are you willing to take drug tests at the Company's request? (Yes/No):	
Have you ever gone by a name other than the one listed above? (Yes/No, If yes, list):	

Education

School 1 - Name of College / Location:	
Years Completed / Degree/Major:	
GPA / Diploma Obtained (Yes/No):	
School 2 - Name of College / Location:	
Years Completed / Degree/Major:	
GPA / Diploma Obtained (Yes/No):	
School 3 - Name of College / Location:	
Years Completed / Degree/Major:	
GPA / Diploma Obtained (Yes/No):	

Military Service

Have you ever served in the U.S. military? (Yes/No):	
Length of service (years, months):	
Rank at time of discharge:	
Training/experience received:	
How did the service benefit you the most?:	

Employment History

Employer 1 - Name / Supervisor:	
Address / Phone:	
Position / Duties:	
Start Date / End Date:	
Start Pay / End Pay:	
May we contact? (Yes/No/Later):	
Reason for leaving:	

Employer 2 - Name / Supervisor:	
Address / Phone:	
Position / Duties:	
Start Date / End Date:	
Start Pay / End Pay:	
May we contact? (Yes/No/Later):	
Reason for leaving:	

Employer 3 - Name / Supervisor:	
Address / Phone:	
Position / Duties:	
Start Date / End Date:	
Start Pay / End Pay:	
May we contact? (Yes/No/Later):	
Reason for leaving:	

Professional References

Reference 1 - Name:	
Phone Number:	
Years Known:	

Reference 2 - Name:	
Phone Number:	
Years Known:	

Reference 3 - Name:	
Phone Number:	
Years Known:	

Additional Information

Awards or Honors Received:	
Professional or Civic Activities:	
Licenses or Certifications:	
Activities or Sports:	
Foreign Language Skills (Yes/No, if yes list):	
Can you perform all job functions with or without accommodation? (Yes/No):	

Professional Profile

What are your main areas of professional interest?
Why do you want to work for us?
Explain a piece of criticism you have received and how you responded to it.
In what work setting or environment do you prefer to work?
Explain one of your greatest professional accomplishments and why it was so great.
Explain a time where you failed and how you dealt with that failure.
Career Goals and Aspirations:

Applicant's Statement

I certify that the information provided in this application is true, to the best of my knowledge.

I understand that providing false or misleading information at any time during the application and interview process may lead to refusal to hire or discharge from the Company. If I become employed by the Company, I agree to follow all rules and regulations of the Company as they develop and change.

I allow the Company to conduct investigations on me, my background and my performance, and am aware that such investigations will become a part of my employment record. With this, I authorize the Company to speak with my acquaintances, personal and professional, to gather information about me.

I authorize all former employers and references to provide any information about me to the Company, and release them of liabilities and damages of all kinds for providing this information. I authorize the Company to verify the accuracy of the information within this application. I also authorize the release of my educational transcripts to the Company for education verification purposes.

I release New Horizons from liability for collecting information about me and using it to make employment decisions.

If I become employed by the Company, I understand that the employment relationship will be "at will," and that the "at will" status may not change at any time unless specifically approved, in writing, by the CEO of the Company.

I agree that if I become indebted to the Company, I will be responsible for repaying the total owed upon termination from the Company. If I do not repay the sum prior to my final paycheck being received, the money owed will be deducted from my pay.

This application for employment is valid for the next 90 days. I understand that if I wish to be considered for employment after this period of time, I must apply again.

Applicant's Signature:

Date:

Please send completed application to m.vanzandt@newhorizonsaba.com and t.freeman@newhorizonsaba.com