

# APPLICANT COPY



**BCDC**

Beaufort County Developmental Center, Inc.

1534 West Fifth Street Washington, NC 27889 | (252) 946-0151

Dear Applicant:

Thank you for your interest in employment opportunities at our organization! This letter is written to you in order to help you understand our employment screening, interview and selection process. Because we are a human service agency, serving children and adults with disabilities, we impose several very stringent requirements, which include a careful review of every employee's background. For example, **IF YOU HAVE EVER BEEN CONVICTED OF A FELONY OR USE ILLEGAL DRUGS, YOU WILL NOT BE HIRED** by this agency in any capacity. If you feel you can pass these requirements, we welcome your application.

At various stages during the screening, interview and selection process you will be required to furnish the following information:

- Have a clear criminal records check for at least the preceding 7 years.
- Pass a pre-employment drug-screen test. **(IF YOU DO DRUGS, DO NOT APPLY.)**
- Provide at least **3** business references, one of which is to be from a Supervisor.
- Submit current tuberculosis screening test (received within the last year).
- Provide a copy of your driving record from the Division of Motor Vehicles. **(You must be "insurable" by our insurance company.)**
- All direct care staff will also be required to be screened with the NC Health Care Personnel Registry.
- Hiring process may require additional information in each department (i.e., fingerprinting, screening through the National Child Care Health Consultant Registry, etc.).

**Step 1:** Anyone interested in being considered for hire (and if they know they can pass the criminal background check and drug test) should complete a Beaufort County Developmental Center job application. Blank applications may be obtained from the front Administrative Office. Completed applications are to be turned into the Receptionist.

**Step 2:** Applications will be reviewed to ensure all blanks have been completed. If application is completely filled out, your application will be forwarded to the appropriate department or area of position vacancy.

OVER

# APPLICANT COPY

**Step 3:** If there is a vacancy, your application will then be screened for qualifications. If there is no vacancy, or your application does not meet suitable qualifications for that particular position, your application will be kept on file for **3 months and then discarded**. If you wish to be considered again for employment after 3 months, you must complete another application.

**Step 4:** If you are chosen for an interview, you will be telephoned to schedule a **FIRST** interview. All applications of interviewed candidates, regardless if hired or not, will be kept on file 1 year from application date.

**Step 5:** At the **FIRST** interview, you will be asked to complete a writing sample. After the first interview is completed, the pool of applicants for a position will be narrowed down through further screening.

**Step 6:** If you are chosen as a potential for hire, you will be called again for a **SECOND** interview if necessary. During the **SECOND** interview, you will be asked to submit three references and submit your criminal record check (available from county clerk of court office).

**Step 7:** If you are the chosen candidate for hire, you will be required to submit a clear tuberculosis screening, a driving record check, 2 forms of identification, and if applicable for position, verification of degrees or licenses.

**Step 8:** When all items in Step 7 have been made available and successfully reviewed, then and **ONLY** then will you be offered the position. The offer of employment will be contingent upon the successful completion of a drug test. **Again, if you do drugs, do not apply for employment with this agency.**

**Because our demand for quality staff is essential to the service we provide, our application/screening process takes time and effort from all involved. We understand your eagerness for employment, and we welcome your interest, however, constant telephone inquiries regarding the status of your application will be discouraged. Your patience and cooperation is appreciated. Again, thank you for choosing our organization during your employment search and best wishes to you from us!**



# APPLICATION FOR EMPLOYMENT

Beaufort County Developmental Center, Inc.  
 1534 W. 5<sup>th</sup> Street  
 Washington, NC 27889

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Last First Middle

Address \_\_\_\_\_  
 Street City State Zip Code

Telephone # (\_\_\_\_) \_\_\_\_\_ Mobile/Beeper/Other Phone # (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Date of Application \_\_\_\_\_

**Referral Source** (Please check the appropriate category and name the source.)

Walk-in \_\_\_\_\_  School \_\_\_\_\_  
 Employee \_\_\_\_\_  Job Fair \_\_\_\_\_  
 Advertisement \_\_\_\_\_  Staffing Agency \_\_\_\_\_  
 Company's Website \_\_\_\_\_  Government Employment Agency \_\_\_\_\_  
 Other Internet \_\_\_\_\_  Other \_\_\_\_\_

How long have you lived in North Carolina consecutively? \_\_\_\_\_

If necessary, best time to call you at home is. _____ am / pm	Will you travel if job requires it?..... <input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact you at work?..... <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> , work number and best time to call: (____) _____ am / pm	If they have been explained to you, are you able to meet the attendance requirements of the position? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
If you are under 18 and it is required, can you furnish a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>no</b> , please explain _____	Will you work overtime if required? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>no</b> , please explain _____ _____
Have you submitted an application here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> , give date(s) and position(s) _____ _____	Driver's license number required if driving may be required in the job for which you are applying: _____ State _____
Have you ever been employed here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> , give dates From _____ To _____	Have you ever been bonded? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally eligible for employment in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No	Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.
Date available for work: _____ What is your desired salary range or hourly rate of pay? \$ _____ Per _____ Type of employment desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Educational Co-Op <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary	Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> , please provide date(s) and details _____ _____ _____ _____ _____
Will you relocate if job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No	

AN EQUAL OPPORTUNITY EMPLOYER

## Employment History

Starting with your most recent employer, provide the following information.

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Starting job title/final job title \_\_\_\_\_ / \_\_\_\_\_  
Immediate supervisor and title (for most recent position held) \_\_\_\_\_ May we contact for reference?  
 yes  No  Later  
Why did you leave? \_\_\_\_\_  
Summarize the type of work performed and job responsibilities. \_\_\_\_\_  
\_\_\_\_\_  
What did you like most about your position? \_\_\_\_\_  
What were the things you liked least about the position? \_\_\_\_\_  
Dates employed: Month \_\_\_\_\_ / Year \_\_\_\_\_ to Month \_\_\_\_\_ / Year \_\_\_\_\_  
Compensation (Salary):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_  
Compensation (Final):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_  
Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Starting job title/final job title \_\_\_\_\_ / \_\_\_\_\_  
Immediate supervisor and title (for most recent position held) \_\_\_\_\_ May we contact for reference?  
 yes  No  Later  
Why did you leave? \_\_\_\_\_  
Summarize the type of work performed and job responsibilities. \_\_\_\_\_  
\_\_\_\_\_  
What did you like most about your position? \_\_\_\_\_  
What were the things you liked least about the position? \_\_\_\_\_  
Dates employed: Month \_\_\_\_\_ / Year \_\_\_\_\_ to Month \_\_\_\_\_ / Year \_\_\_\_\_  
Compensation (Salary):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_  
Compensation (Final):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_

## Employment History continued

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Starting job title/final job title \_\_\_\_\_ / \_\_\_\_\_

Immediate supervisor and title (for most recent position held) \_\_\_\_\_ May we contact for reference?  
 yes  No  Later

Why did you leave? \_\_\_\_\_

Summarize the type of work performed and job responsibilities. \_\_\_\_\_

\_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were the things you liked least about the position? \_\_\_\_\_

Dates employed: Month \_\_\_\_\_ / Year \_\_\_\_\_ to Month \_\_\_\_\_ / Year \_\_\_\_\_

Compensation (Salary):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_

Compensation (Final):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Starting job title/final job title \_\_\_\_\_ / \_\_\_\_\_

Immediate supervisor and title (for most recent position held) \_\_\_\_\_ May we contact for reference?  
 yes  No  Later

Why did you leave? \_\_\_\_\_

Summarize the type of work performed and job responsibilities. \_\_\_\_\_

\_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were the things you liked least about the position? \_\_\_\_\_

Dates employed: Month \_\_\_\_\_ / Year \_\_\_\_\_ to Month \_\_\_\_\_ / Year \_\_\_\_\_

Compensation (Salary):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_

Compensation (Final):  Hourly  Salary \$ \_\_\_\_\_ Commission/Bonus/Other Compensation \$ \_\_\_\_\_

## Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If not addressed on previous page, have you ever been fired or asked to resign from a job?  Yes  No

If **yes**, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Computer Skills** (Check appropriate boxes. Include software titles and years of experience.)

- |  |             |  |             |
|--|-------------|--|-------------|
| <input type="checkbox"/> Word Processing _____ | Years _____ | <input type="checkbox"/> Internet _____    | Years _____ |
| <input type="checkbox"/> Spreadsheet _____     | Years _____ | <input type="checkbox"/> Power Point _____ | Years _____ |
| <input type="checkbox"/> Presentation _____    | Years _____ | <input type="checkbox"/> Other _____       | Years _____ |
| <input type="checkbox"/> E-mail _____          | Years _____ | <input type="checkbox"/> Other _____       | Years _____ |

## Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

## References

List name and telephone number of three business/work references who are *not* related to your and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship to you	Telephone	Number of Years Known

## Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

Organization	Offices Held

List special accomplishment, publications, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

\_\_\_\_\_

In your current or a prior job, have you ever written instructions or directions to be followed by employees or customers?  Yes  No  Not Applicable

If yes, please explain: \_\_\_\_\_

Is there any other job-related information you want us to know about you? \_\_\_\_\_

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that his application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me 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 with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws required me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

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

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_