**WINGS FOR CHILDREN & FAMILIES, INC.**

**900 HAMMOND STREET, SUITE 915**

**BANGOR, ME 04401**

**(207) 941-2988; (800) 823-2988**

It is the policy of Wings to provide equal employment opportunities to all applicants and employees without regard to race, color, sex, physical or mental disability, religion, age, ancestry, national origin, sexual orientation, or other legally protected status.

# Date of Application

# Name

 Last First Middle

# Present Address

 Street City State Zip

# Permanent Address

 Street City State Zip

Phone Number Are you over 18 years old? Yes No

# How did you learn of this opening?

Have you worked here before? Yes No

Have you ever been convicted of a crime involving client abuse, neglect or exploitation; a crime involving intentional or knowing conduct that caused, threatened, solicited or created substantial risk of bodily harm to an individual; resulting from a sexual act, contact, touching or solicitation in connection to any victim; or Classified as Class A, B or C or the equivalent of any of these, or any reckless conduct that caused, threatened, solicited or created the substantial risk of bodily injury to another person within the preceding two years. Yes No

### EMPLOYMENT DESIRED

## Position Applied for Date you can start

Salary/Wage Desired

Are you employed now? Yes No If so, may we contact your present employer? Yes No

### EDUCATION

 Circle Last Did you Diploma/

 Name and Location of School Year Completed Graduate? Degree

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| High School |  | 1 2 3 4 | Yes No  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| College |  | 1 2 3 4 | Yes No  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Graduate School |  | 1 2 3 4 | Yes No  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Other Training/Education: |

**WORK HISTORY Please fill out completely, please do not write “refer to resume”.**

Current/Most Recent Employer May we contact? Yes No

Address Telephone ( )

Date Started Date Left

Name & Title of Supervisor

Reason for Leaving

Starting Position Ending Position

Description of Duties

Previous Employer

Address Telephone ( )

Date Started Date Left

Name & Title of Supervisor

Reason for Leaving

Starting Position Ending Position

Description of Duties

Previous Employer

Address Telephone ( )

Date Started Date Left

Name & Title of Supervisor

Reason for Leaving

Starting Position Ending Position

Description of Duties

Previous Employer

Address Telephone ( )

Date Started Date Left

Name & Title of Supervisor

Reason for Leaving

Starting Position Ending Position

Description of Duties

# In addition to your work history, what other experiences, skills or qualifications do you have which you believe would benefit the

agency?

**REFERENCES List three work-related references.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Address | Phone | Position | Years Acquainted |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |

#### Applicant’s Certification & Agreement

I certify that the information contained in this application is correct and that I have not omitted any information. I understand that falsification or omission of information may result in immediate dismissal.

I agree and acknowledge that my employment can be terminated, with or without cause or notice, at any time by Wings or myself. I further agree and acknowledge that no Wings representative other than the Executive Director has the authority to make any oral or written agreements for employment for a specified time or for specific conditions of my employment. I further agree and acknowledge that any agreement for employment for a specified period of time or specific conditions of my employment must be in writing and signed by the Executive Director and me.

I authorize all schools, references, employers and any other person to provide my complete record, reason for leaving, and all other information they may have concerning me, including my personal character, habits, and employment records. I hereby release all such persons from any and all liability or claims for damage whatsoever that may result from responding to any inquiry or furnishing any information.

Signature of Applicant Date

*Revised October 2021*