



APPLICATION FOR EMPLOYMENT

This is a pre-employment questionnaire. Danville Services of Oregon, LLC is an equal opportunity employer

Personal Information

Date _____

Name _____
Last First Middle

Address _____
Street City State Zip Code

Phone Number _____ Message Number _____

Email _____

In case of emergency notify _____
Name Address Phone Number

Are you 18 years of age or older?	Yes []	No []
Are you 21 years of age or older?	Yes []	No []

Have you ever been convicted of a crime? Yes [] No []
Have you ever been alleged to have abused, neglected, or abandoned a child or adult where the allegations were substantiated? Yes [] No []
If yes to either question, please attach a separate sheet and provide a detailed explanation including dates, locations, and sufficient details regarding charges or allegations.

Most of the positions here require the ability to lift 50 lbs. Can you, without any restrictions, perform this job duty? Yes [] No []

Do you have a current and valid driver's license? Yes [] No []
Have you had three or more moving violations, a DUI, a suspension, or a revocation in the past five years? Yes [] No []
If yes, please explain. Please include dates in your explanation.

How did you hear about the job position? *Newspaper, Craig's List, friend, employee (give name), etc.*

Position Desired _____ **Employment Desired** On call [] Part time [] Full time []

<u>Availability</u> – Please include the hours you are available for each day.
Monday _____ Tuesday _____ Wednesday _____ Thursday _____
Friday _____ Saturday _____ Sunday _____ (Weekends are often required.)
<u>Date You Can Start</u> _____

Have you worked for Danville before? Yes [] No [] If so, where? _____ When? _____

Former Employers (Please list your last three employers, starting with the most recent one first.)

1. Dates of employment _____ to _____
If current employer, may we contact them? Yes or No (Circle One)
Name of Employer _____ Phone Number _____
Address _____
Supervisor _____ Supervisor's Phone Number _____
Salary _____ Position _____ Reason for Leaving _____
2. Dates of employment _____ to _____
Name of Employer _____ Phone Number _____
Address _____
Supervisor _____ Supervisor's Phone Number _____
Salary _____ Position _____ Reason for Leaving _____
3. Dates of employment _____ to _____
Name of Employer _____ Phone Number _____
Address _____
Supervisor _____ Supervisor's Phone Number _____
Salary _____ Position _____ Reason for Leaving _____

Professional/Work References (Please list the names of three persons who can comment on your prior work or education history.)

1. Name _____ Phone Number _____
2. Name _____ Phone Number _____
3. Name _____ Phone Number _____

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the reference and former employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the same to you.

I understand and agree that, if hired, my employment with Danville Services of Oregon, LLC, can be terminated with or without cause, and with or without prior notice, at any time, at the option of Danville Services of Oregon, LLC, or at my option. I also understand and agree that Danville Services of Oregon, LLC, reserves the right to change, add to, or delete employment-related policies and procedures at any time. Changes in employment-related policies and/or procedures will be effective on dates determined by the company. I understand that I may not rely on policies or procedures that have been superseded. I also understand that no supervisor or manager other than the CEO has the authority to alter the policies and those such changes must be in writing.

Signature _____ **Date** _____

EMPLOYEE STATEMENT PERTAINING TO BACKGROUND INVESTIGATION

MY SIGNATURE BELOW INDICATES THAT I HAVE NOT BEEN CONVICTED OF ANY OF THE FOLLOWING CRIMES OR CIVIL OFFENSES:

1. *Murder or voluntary manslaughter.*
2. *Assault of any kind.*
3. *Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure, or any other sexually-related crime.*
4. *Abuse, neglect or abandonment of child or adult or contributing to the delinquency of a minor.*
5. *Violation of any federal or state law concerning the possession, distribution or any use of any controlled substance or any dangerous drug within the past seven years.*
6. *Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property within the past seven years.*
7. *Any other felony involving the use of a firearm or other deadly weapon within the immediately preceding seven years.*

By signing below, I agree to allow Danville Services of Oregon, L.L.C. and/or the Oregon Dept. of Human Services to obtain my fingerprints and to request background verification. I also agree to allow Danville and/or the Oregon Department of Human Services to obtain a Background Criminal History check. Should any disqualifying conviction or substantiated abuse, neglect, or abandonment finding arise through this background check, I understand that I will no longer be qualified for employment with Danville and any employment relationship I have established with Danville will be terminated.

I understand that in order to work in a position that requires driving company vehicles or my vehicle for business purposes, I must have a driving record with no more than three moving violations/minor offenses and no DUI, suspensions, or license revocations in the past five years. I understand that failure to meet the driving requirements could jeopardize my position with Danville Services of Oregon, L.L.C.

The release of any and all information is authorized whether the same is of record or not and I do hereby release all persons, firms, agencies, companies, groups, or installations whomsoever, from any damages of, or resulting from, furnishing such information to Danville and/or Danville's Insurance Companies.

Printed Name

Signature

Date

Applicant: Please complete only the boxed section. Danville will complete the reference check process.

Request for Employment Verification

Applicant Name _____ Last Four Digits of SSN _____

Having made application with Danville Services of Oregon, L.L.C., I hereby authorize the release of information directly to said company. I release and hold harmless present and past employers, references and all persons and institutions whomsoever, from any charge because of furnishing information. I waive any application to the Family Education and Privacy Act insofar as the same might apply to this request for information.

Signature of Applicant _____ Date _____

To Former Employer: Please give the following information about this applicant. Information will be held in strict confidence.

Company Name: _____

Dates of Employment: _____ to _____

Position: _____

- | | | | | |
|-----------------------------|-----------|--------------|------------|------------|
| 1. Quality of work | Excellent | Good | Fair | Poor |
| 2. Cooperation with others | Excellent | Good | Fair | Poor |
| 3. Safety Habits | Excellent | Good | Fair | Poor |
| 4. Personal Habits | Excellent | Good | Fair | Poor |
| 5. Driving Skills | Excellent | Good | Fair | Poor |
| 6. Attendance Record | Excellent | Good | Fair | Poor |
| 7. Needed Supervision | Rarely | Occasionally | Frequently | Constantly |
| 8. Why did applicant leave? | _____ | | | |

9. If company policy allowed, would you rehire? _____

10. *While in your employment, did applicant have custody of money and/or valuables?*
Yes No *If so, were these kept properly?* Yes No

11. Additional comments:

Signature of Company Representative

Title

Date