



Saving Lives & Families from Addiction
446 N. 12th Street, Baton Rouge, La. 70802
Phone: 225-344-6345 Fax: 225-246-7943
www.obrienhouse.org

APPLICATION FOR EMPLOYMENT

Date: _____

Last Name: _____ First Name: _____ MI: _____

SS#: _____ DOB: _____ Email: _____

Home#: _____ Cell#: _____

Address: _____ City: _____ State: _____ Zip: _____

How long have you lived at this Address (years/months): _____

Previous Address: _____ How Long: _____

Position Applying For: _____ { }Full Time { }Part Time { }Temp/OnCall

Rate of Pay Expected: \$ _____ How did you hear about us: _____

Have you Worked for Us Before: { }Yes { }No If Yes, When/How Long Ago? _____

****NOTICE TO APPLICANTS:** Federal and State Law require that all applications be considered without regard to race, religion, color, sex, age or national origin. We believe in, and fully support, the principle of equal employment opportunity, and will fulfill our obligation to the fullest.

Have You Ever Been Convicted of a Felony? { }No { }Yes

If Yes, Please List Convictions Including Dates: _____

List Any Additional Information You Wish to Provide in The Space Below:

List Any Specialized Training, Additional Schooling or Education, Degrees, Awards, etc:

EDUCATION HISTORY

High School: _____

Address: _____

City/State/Zip: _____

Please check one: Graduated/High School Diploma Some High School Education GED

College: _____

Address: _____

City/State/Zip: _____

Graduated: Yes No **GPA:** _____

Degree/Major: _____

Other: _____

Address: _____

City/State/Zip: _____

Grade Completed: _____

Graduated: Yes No **GPA:** _____

Degree/Major: _____

EMPLOYMENT HISTORY

Work history must be inclusive of the past 5 years

Company: _____ **Job Title:** _____

Address: _____ **City/State/Zip:** _____

Supervisor: _____ **Phone#:** _____

Dates Employed From: _____ **To:** _____

Starting Pay: _____ **Ending Pay:** _____

Reason for Leaving: _____

Company: _____ **Job Title:** _____

Address: _____ **City/State/Zip:** _____

Contact Name: _____ **Phone #:** _____

Dates Employed From: _____ **To:** _____

Starting Pay: _____ **Ending Pay:** _____

Reason for Leaving: _____

Company: _____ **Job Title:** _____

Address: _____ **City/State/Zip:** _____

Contact Name: _____ **Phone #:** _____

Dates Employed From: _____ **To:** _____

Starting Pay: _____ **Ending Pay:** _____

Reason For Leaving: _____

WORK REFERENCES

Please list professional references. (ex: supervisors, coworkers, teachers, etc.) Do not list family members.

1. Name: _____

Address: _____

Phone Number: _____

2. Name: _____

Address: _____

Phone Number: _____

3. Name: _____

Address: _____

Phone Number: _____

Please read and sign below:

The information provided by me in this application for employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal. You are hereby authorized to conduct any investigation of my personal history and/or credit and credit reporting financial records, employing investigative or credit bureaus of your choice subject to the provisions of the Fair Credit Reporting Act.

Signature of Applicant

Date

REFERENCE CHECK

*****FOR OFFICE USE ONLY. PLEASE DO NOT FILL OUT.*****

1. Name: _____

Comments: _____

2. Name: _____

Comments: _____

3. Name: _____

Comments: _____

Departmental Signee

Date