

# Application for Employment/Personnel Record

Where did you learn about this job opening?			
<b>Craig's List</b> <input type="checkbox"/> Chico <input type="checkbox"/> Fresno <input type="checkbox"/> Humboldt <input type="checkbox"/> Mendocino <input type="checkbox"/> Sacramento <input type="checkbox"/> SF Bay Area	<b>Websites</b> <input type="checkbox"/> CalJOBS <input type="checkbox"/> Idealist <input type="checkbox"/> Indeed <input type="checkbox"/> Linked In <input type="checkbox"/> ZipRecruiter <input type="checkbox"/> Other	<b>Newspapers/Magazines</b> <input type="checkbox"/> Press Democrat <input type="checkbox"/> Record Bee <input type="checkbox"/> Ukiah Daily Journal <input type="checkbox"/> Nat'l Assoc. of Social Workers <input type="checkbox"/> Other	<b>TFS Employee</b> <hr/> (name) <hr/> (referral date)



## TAPESTRY FAMILY SERVICES

**Tapestry Family Services is an Equal Opportunity Employer and an Equal Opportunity Provider.**

Office – 290 East Gobbi Street, Ukiah, CA 95482 ❖ Tel (707) 463-3300 ❖ Fax (707) 463-3318 ❖ [info@tapestryfs.org](mailto:info@tapestryfs.org)

<b>1. Personal</b>					Date:	
Name: Last		First		Middle	Telephone number	
Street Address:			Email Address:		Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No If no please state your age: __	
City:	State:	Zip:				
Social Security number (voluntary for ID only)			Date of last physical examination		Date of last TB test	
Have you ever been employed under a different name? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes please list all names used						
Do you possess a valid California driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No CDL Number:				Has your driver's license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes please explain on back of form		
Nearest living relative – name				Telephone number		Relationship
Address						
<b>2. Position for which you are applying:</b>						
<b>3. Education</b>						
Check highest year completed 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>			Diploma	Currently enrolled in high school completion course? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes give expected completion date.		
Name of University, College or Business School and address		Major Subject	Number of years completed	Number of units completed	Diploma Degree or Certificate	Date completed



# TAPESTRY FAMILY SERVICES

**Other employment-related course work** (in addition to programs listed above)

Course title	Name of school or organization and address	Number of units completed	Date completed	Currently enrolled

**4. Professional and technical qualifications**

A. List licenses or Certificates of Competence held:

B. Names of Professional Associations of which you are a member:

**5. Previous Employment** (List most recent experience first. If additional space is needed, please attach your resume or a separate page)

Name and address of employer	Telephone number	Job title and type of work	Reason for leaving	Dates (month/year)	
				From	To

**6. Professional References – Please include your three most recent Supervisors**

Name	Relationship (professional only)	Length of relationship	Work phone	Home phone

**Notes:**

(Please attach additional page if more space is needed)

My signature below gives Tapestry Family Services permission to obtain employment and related information from the references that I have listed. My signature also indicates that all of the information provided on this application is true and correct and gives Tapestry permission to verify this information as necessary.

You are free to resign at any time, just as the organization is free to terminate your employment for any reason at any time. This provision can be modified only in writing, signed by an officer of Tapestry Family Services."

*I understand that my employment can be terminated at any time, with or without cause, and with or without notice, at the option of either Tapestry Family Services or myself.*

**Signature:****Date:**