



# TEAMBUILDERS COUNSELING SERVICES, INC. APPLICATION FOR EMPLOYMENT

Please print or type. Complete all questions and sign on page 6.

**“SEE RESUME”** is not a sufficient response to any question.

Last Name	First	Middle	Date of Application
Street Address			Home Telephone
City, State, Zip Code			Work Telephone
Position Desired	Date Available	Social Security Number	Cellular Telephone
Type of Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer <input type="checkbox"/> Internship		Are you legally eligible for employment in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Proof of U.S. citizenship or immigration status will be required upon employment.</b>			

### EDUCATION

Level	Name and Location of School <small>(Please note that provision of an official copy of transcripts for any post-secondary work is a pre-employment requirement)</small>	Diploma or Degree <small>(Credits Earned if No Degree)</small>	Attendance Dates		Major
			From <small>Mo/Yr</small>	To <small>Mo/Yr</small>	
High School*					
College*					
Graduate School*					
Other*					

\*If degree was received under a name other than that listed on this application, please provide your full name at the time the degree was awarded:

Degree: \_\_\_\_\_ Name At Time Earned: \_\_\_\_\_

Notable Scholastic Achievements:



# TEAMBUILDERS COUNSELING SERVICES, INC.

## SKILLS AND QUALIFICATIONS

Summarize specific skills and qualifications acquired from employment or other experiences that are related to the position for which you are applying (e.g., previous work with children and/or in the behavioral health field, computer skills, software applications, foreign languages):

## EMPLOYMENT HISTORY

Please provide a COMPLETE employment history, even if a resume is submitted with this application. List ALL employers, assignments, or volunteer activities, starting with the most recent. Five most recent years' employment history is the minimum acceptable requirement. Completely explain any gaps in employment in the "Comments" section below. Please use the "Employment History Continuation Sheet" if additional space is needed.

<b>(1) Present/Most Recent Employer      Telephone</b>		Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer <input type="checkbox"/> Internship		Hourly Rate/Salary		
		Final		
Reason for leaving or why you are considering leaving?		\$	per	
If currently employed, may we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>(2) Next Previous Employer      Telephone</b>		Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer <input type="checkbox"/> Internship		Hourly Rate		
		Final		
Reason for leaving?		\$	per	



# TEAMBUILDERS COUNSELING SERVICES, INC.

## EMPLOYMENT HISTORY CONT.

<b>(3) Next Previous Employer</b>	<b>Telephone</b>	<b>Dates Employed</b>		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment		Hourly Rate		
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer <input type="checkbox"/> Internship		Final		
Reason for leaving?		\$	per	

<b>(4) Next Previous Employer</b>	<b>Telephone</b>	<b>Dates Employed</b>		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment		Hourly Rate		
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer <input type="checkbox"/> Internship		Final		
Reason for leaving?		\$	per	

COMMENTS (including complete explanation of any gaps in employment longer than 30 days):



# TEAMBUILDERS COUNSELING SERVICES, INC.

### REFERENCES

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

Name	Telephone	Years Known	In what capacity did this person observe you or your work?

### PROFESSIONAL LICENSES

List any professional license(s) that are related to the position for which you are applying. List state(s) in which licensed and expiration date(s). Please note that a copy of all relevant licenses must be provided prior to employment:

### MEMBERSHIPS

List professional, trade, business, or civic associations that you consider relevant to the position for which you are applying (exclude memberships which would reveal sex, race, religion, national origin, age, color, or disability).

Organization	Offices Held

### SPECIAL ACCOMPLISHMENTS, PUBLICATIONS AND AWARDS

Exclude information that would reveal sex, race, religion, national origin, age, color, or disability.

# **TEAMBUILDERS** **COUNSELING SERVICES, INC.**

## OTHER INFORMATION

Have you ever been convicted of, or are you now under charges for, any misdemeanor or felony offense? You may omit (1) traffic fines, (2) any offense committed before your 18<sup>th</sup> birthday which was finally adjudicated in a juvenile court or under a youth offender law, (3) any conviction the record of which has been expunged under federal or state law, and (4) any conviction set aside under the Federal Youth Corrections Act or similar authority. (A yes response will not necessarily disqualify you from employment.)  Yes  No  
 If checked yes, please explain below.

If you have ever been granted a security or background clearance by any government agency, indicate the type and level of clearance, when granted, and by whom?

Have you ever had a background or security clearance suspended, denied, or revoked?  Yes  No

Are you bound by any non-solicitation/non-compete agreement?  Yes  No

Have you ever interviewed for a job with any TeamBuilders Office?  Yes  No

If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_

Have you ever been employed by any TeamBuilders Offices?  Yes  No

If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_

Are any relatives or friends currently employed by TeamBuilders Counseling Services?  Yes  No

Name of employee(s) \_\_\_\_\_ Office where employed \_\_\_\_\_

What prompted your application to TeamBuilders? Ad \_\_\_\_\_ Friend \_\_\_\_\_

(Please indicate name of ad/friend) TeamBuilders Employee \_\_\_\_\_ Other \_\_\_\_\_

Emergency Contact Name	Relationship	Telephone

**PLEASE CAREFULLY REVIEW EACH RESPONSE PROVIDED IN THE ABOVE APPLICATION.  
 WE WILL NOT CONSIDER FOR EMPLOYMENT ANY CANDIDATE WHO HAS NOT  
 COMPLETED THIS APPLICATION IN FULL.**

# TEAMBUILDERS COUNSELING SERVICES, INC.

PLEASE READ THE FOLLOWING AND SIGN THE APPLICATION IN THE SPACE PROVIDED BELOW. IF YOU HAVE ANY QUESTIONS, PLEASE SPEAK WITH THE HUMAN RESOURCES REPRESENTATIVE BEFORE SIGNING.

I understand that employment with TeamBuilders Counseling Services, Inc. (TeamBuilders) is “at will.” This means that the employment relationship can be ended by me or by TeamBuilders at any time for any reason with or without advanced notice and with or without cause. Notwithstanding the above, I understand that it is a requirement for maintaining eligibility for re-employment by TeamBuilders that salaried personnel give at least thirty (30) days written notice and that hourly personnel give at least fourteen (14) days written notice of intent to terminate employment.

I understand that TeamBuilders and its management may revise and make exceptions to its policies, practices, handbooks, manuals, rules, procedures, and regulations, in whole or in part, at any time. I further understand that acceptance of an offer of employment does not create a contractual obligation upon TeamBuilders to continue to employ me in the future or for any specific term. I understand that no representative of TeamBuilders, except the Chief Executive Officer, has any authority to enter into any agreement of employment with me and that although a member of TeamBuilders’ management may make an offer of employment, any such offer is not finalized until the Chief Executive Officer has signed appropriate documentation allowing such employment to take effect.

If employed by TeamBuilders, I agree to comply with all safety and health rules, company policies and procedures, and local, state, and federal laws pertaining to my employment. Although management makes every effort to accommodate individual preferences, organizational needs may make the following conditions mandatory: overtime, rotating work schedule, or a work schedule other than Monday through Friday or during normal business hours. I further understand that activities of employment may take place outside an office setting, in homes, schools or communities. I understand and accept these as conditions of my employment should I be hired.

I have reviewed this application carefully and I hereby affirm that my statements and answers to all questions on this application are true and correct and that I have not knowingly withheld any fact or circumstance that, if disclosed, would affect my application unfavorably. I understand that any misstatement or omission of fact on this application may result in my application not being considered, and, if employed, may result in my immediate dismissal.

**I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS:**

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

Signature of Witness \_\_\_\_\_ Date \_\_\_\_\_



# TEAMBUILDERS COUNSELING SERVICES, INC.

## EMPLOYMENT HISTORY CONTINUATION SHEET

Last Name	First	MI	Date of Application	
Please place a number in the upper left-hand parentheses to designate the next previous employer, as continued from page 3 of the Employment Application, if this is your first continuation sheet, then the number is 5.				
<b>( ) Next Previous Employer</b> <b>Telephone</b>		Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer <input type="checkbox"/> Internship		Hourly Rate/Salary		
		Final		
Reason for leaving?		\$	per	
<b>( ) Next Previous Employer</b> <b>Telephone</b>		Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer <input type="checkbox"/> Internship		Hourly Rate		
		Final		
Reason for leaving?		\$	per	

# TEAMBUILDERS COUNSELING SERVICES, INC.

## INVESTIGATION AUTHORIZATION

By signing below, I hereby authorize TeamBuilders to conduct an investigation into my background and to conduct reference checks concerning all statements contained in my application for employment; to interview all employers, references, and other individuals and institutions to obtain information and opinions about me; and to conduct any other investigation that it deems appropriate. Such investigation may include but is not limited to my education, employment history (except my current employer prior to my giving notice if I have so indicated above), character, general reputation, driving record, credit history, and criminal record. In the event that I am employed by TeamBuilders, I hereby authorize TeamBuilders to answer any inquires regarding my employment, conduct, qualifications, and reasons for leaving.

I understand that I have the right to request TeamBuilders to disclose to me, completely and accurately, the nature and scope of the investigation. (Such a request must be made in writing to the human resources department within a reasonable time after you have completed and signed this authorization.)

In exchange for being considered for employment, I hereby release TeamBuilders, its employees, and agents, as well as any law enforcement agency, current or former employer, educational institution, credit agency, or any other individual providing information about me to TeamBuilders, from any liability arising from disclosure of such information that is obtained during said investigation.

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Signature of Applicant

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Date

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Signature of Witness

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Date