



**REQUIRED BACKGROUND CHECKS:**

Because of the nature of the business of GUIDE Program, Inc. all employees are required to submit to Child Protective Services and/or Federal and State criminal background checks. Furthermore, GUIDE Program, Inc. cannot legally employ individuals with results on their background checks that conflict with current regulations. Residential Child Care Regulations prohibit us from employing someone in a residential child care program who: refuses to submit to a criminal background check; has an indicated child abuse or neglect finding or a conviction for child abuse or neglect, spousal abuse, rape, sexual assault, homicide, or any crime against children; has a conviction within 5 years of applying for a job with the program for assault or a drug-related offense; or has conviction within 5 years for a violation of contributing to the delinquency of a child or causing a child to be found in need of supervision.

Have you ever been convicted of any crime, have any pending charges, received a "probation before judgment", received a not criminally responsible disposition , or pled "no contest" for any crimes listed in the previous paragraph?

YES  NO

If yes, state the offense, location, date, and disposition: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT DESIRED:**

Are you seeking: Full-Time  Part-Time  Temporary or Summer Employment?  Internship/Volunteer

Desired Position: \_\_\_\_\_ Salary: \_\_\_\_\_ Date you are available to start: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Have your ever applied to GUIDE before? YES  NO

Have you ever worked for GUIDE before? YES  NO

If your answer to either of the above questions is yes, state when and where you applied and/or worked? \_\_\_\_\_

\_\_\_\_\_

How did you learn about GUIDE and/or the position? \_\_\_\_\_

Are you, or do you expect to be, working in any other business or job simultaneous to GUIDE? YES  NO

Are there any days or hours you would be unable or unwilling to work? YES  NO

If yes, please specify those days and/or hours you would be unable or unwilling to work: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION:**

Name, Address/Location	Dates	Graduate?	Courses Studied
High School	From: ___/___/___ To: ___/___/___	YES <input type="checkbox"/> NO <input type="checkbox"/>	Diploma:
College	From: ___/___/___ To: ___/___/___	YES <input type="checkbox"/> NO <input type="checkbox"/>	Diploma:
Graduate School	From: ___/___/___ To: ___/___/___	YES <input type="checkbox"/> NO <input type="checkbox"/>	Diploma:
Other Schooling	From: ___/___/___ To: ___/___/___	YES <input type="checkbox"/> NO <input type="checkbox"/>	Diploma:

(ADDITIONAL SPACE IS PROVIDED ON PAGE 6 IF NECESSARY, OR REFER TO RESUME)

If you did not graduate, why did you leave high school, college, graduate, or other school? \_\_\_\_\_

Are you planning to pursue further studies? YES  NO

If so, when, where and what courses? \_\_\_\_\_

List and describe any other specialized training: \_\_\_\_\_

**MILITARY:**

Have you ever served in the military? YES  NO

Service Branch: \_\_\_\_\_

Date entered: \_\_\_\_\_

Date Separated: \_\_\_\_\_

Final Rank: \_\_\_\_\_

**CAPABILITY/RELIABILITY:**

Do you have the ability to work over-time and/or to reach varying job sites as needed throughout the wider Washington/Baltimore/Annapolis Metropolitan Area? YES  NO

If no, please explain: \_\_\_\_\_

Drivers License: State: \_\_\_\_\_ Number: \_\_\_\_\_ Currently Valid? YES  NO   
(ANNUAL DRIVING RECORD CHECKS ARE REQUIRED AS PART OF THE EMPLOYMENT PROCESS)

Would you be able to perform all tasks required of the job for which you are applying with or without reasonable accommodations? YES  NO

If not, explain which task: \_\_\_\_\_

Have you filed any type of fraudulent claim against any of your present or past employers? YES  NO

If yes, explain: \_\_\_\_\_

Will you abide by policies, procedures, rules and regulations of GUIDE? YES  NO

Is there anything in your background or personal life that would be a barrier to your fully abiding by GUIDE's workplace policies and procedures as outlined in the Employee Handbook, including the Drug and Alcohol Free Workplace/Illegal Substance Use regulation.? YES  NO

If yes, please explain: \_\_\_\_\_

Have you ever been disciplined for violating company policies, procedures, rules or regulations? YES  NO

If yes, please explain: \_\_\_\_\_

Would you be willing and able to report to work when scheduled on a regular and consistent basis? YES  NO

If no, please explain: \_\_\_\_\_

**WORK HISTORY: (Specific details are required for this section.)**

List names of employers in consecutive order with present or last employment listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

**(PLEASE GIVE MONTH AND YEAR - Current/previous employers will be contacted for business/professional references)**

NAME OF EMPLOYER: ADDRESS:		NAME/TITLE OF SUPERVISOR	DATES EMPLOYED		PAY
YOUR TITLE:	TELEPHONE:		FROM: MO/YR	TO: MO/YR	START \$ END \$
NATURE OF BUSINESS:		REASON FOR LEAVING:			
DUTIES:					



Have you had any computer or word processing experience or training?

YES  NO

If yes, please describe: \_\_\_\_\_

What languages do you speak fluently? \_\_\_\_\_

Use this space to describe why you are interested in working for GUIDE and the skills and abilities, which you feel particularly, qualify you for a position with us. If you need more space, please continue below or on a separate sheet.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES:**

Three professional references are required for all applicants. Authorization for the reference to release information and contact information must be provided on copies of the GUIDE Reference Check Form, a copy of which can be obtained from: <http://www.guideprogram.org/ReferenceCkForm.pdf>.

**ADDITIONAL SPACE:** (For extended comments, volunteer work, work history, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AFFIDAVIT:**

I HEREBY CERTIFY THAT my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form, other documentation, or during any interview may be grounds for my immediate discharge.

I HEREBY AUTHORIZE GUIDE to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications, and I give my full and complete consent to current and previous employers' revealing any and all information they may wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

I AGREE THAT if I am employed, I will abide by all the policies, procedures, rules, and regulation of GUIDE. I understand that the taking of a drug and alcohol test, when given pursuant to company policy, is a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. In the absence of a written employment agreement, I understand that employment with the GUIDE Program is "at will" and, in such case, may be terminated by the company at anytime for any reason or no reason at all, with or without prior notice. Some jobs at GUIDE may be eligible for the establishment of a formal employment agreement or contract. No one at GUIDE has the authority to modify the "at will" employment relationship or enter into any employment contract with an employee except the Executive Director or other designee of the Board of Directors, and then only by written agreement.



**I UNDERSTAND THAT a criminal justice background record check supported by required fingerprinting will be conducted on all new hires through the State of Maryland Criminal Justice Information System (CJIS) and the FBI, and all applicants will be checked against the Maryland Judiciary Case Search website. I further understand that applicants for positions in services supported by federal healthcare programs will be cross-checked against the federal debarment database; and, applicants for positions in certain children's programs will have to undergo a child protective services background check through the appropriate Department of Social Services. I hereby grant GUIDE permission to conduct all necessary background investigations. I also understand that UNDER MARYLAND LAW AN EMPLOYER MAY NOT REQUIRE OR DEMAND ANY APPLICANT FOR EMPLOYMENT OR PROSPECTIVE EMPLOYMENT TO SUBMIT TO OR TAKE A POLYGRAPH, LIE DETECTOR OR SIMILAR TEST OR EXAMINATION AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. ANY EMPLOYER WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT TO EXCEED \$100.00.**

**APPLICANT  
SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**WITNESS  
SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

 <b>GUIDE USE ONLY</b> 
<b>INTERVIEWED BY:</b>
<b>INTERVIEWER'S REMARKS:</b>

REVISED 2/24/09