



Application For Employment

Administrative Office
525 North 4th Street, Room 106
PO Box 687, Vincennes, IN 47591
(812) 882-7927

Pace and all of its subsidiaries are an Equal Opportunity Employer and selects the best qualified applicant for the position based upon job related qualifications, regardless of race, color, religion, gender, disability, national origin or any other basis prohibited by law, unless such basis accommodation to qualified individuals with disabilities.

**Applicant must ensure application is correct, signed and includes a signed job description.
Application may not be considered if an incomplete application is submitted.**

Applicant Information	
Name (First, MI, Last)	
Mailing Address	
City, State, and Zip Code	
Home Phone	Other Phone
Position(s) applying for:	Salary Expectation: \$

General Information	
1.) Are you 18 years of age or over?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.) Are you legally authorized to work in United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you now or in the future require sponsorship for employment visa status (e.g. H-1B)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3.) Have you worked for this organization before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, list position(s) held and dates employed.	
4.) Have you previously been interviewed for a position with this organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, list position(s) and dates.	
5.) Do you have relatives or in-laws working in this organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, list name, relationship and program area.	
6.) Have you ever been discharged or permitted or forced to resign from any job?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain.	
7.) Do you possess a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No

AGENCY USE ONLY:		
Date Received:	Initials:	Date
Interview:		
CEO Approval:		
Notification:		

Work Experience

Provide information from work experience (*at least through the past 10 years*). You must include employer name, address, phone number, and job duties.

From (mm/yr)	To (mm/yr)	Job Title	Hours Worked
Describe your duties and accomplishments			
Employer's Name, Address, Phone Number, and Immediate Supervisor			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, state the reason why you prefer that we do not contact the employer.			

From (mm/yr)	To (mm/yr)	Job Title	Hours Worked
Describe your duties and accomplishments			
Employer's Name, Address, Phone Number, and Immediate Supervisor			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, state the reason why you prefer that we do not contact the employer.			

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Describe your duties and accomplishments			
Employer's Name, Address, Phone Number, and Immediate Supervisor			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, state the reason why you prefer that we do not contact the employer.			

Attach additional sheets if needed

Education

Mark highest level completed:

Some HS
 HS/GED
 Some College
 Associate
 Bachelor
 Master
 Doctoral

Colleges or Universities Attended:	Major(s)	Degree Awarded (if any)

Professional Certificate(s) or License(s)

Title	Registration Number	Expiration Date
Title	Registration Number	Expiration Date

Professional References

(References should only be **professional** and not related to you)

Name:	Title/Relationship:
Mailing Address:	Phone Number:

Name:	Title/Relationship:
Mailing Address:	Phone Number:

Name:	Title/Relationship:
Mailing Address:	Phone Number:

Applicant's Declaration, Notification & Agreement

Please **PRINT** Name: _____

BEFORE SIGNING PLEASE READ THE FOLLOWING CAREFULLY:

Application will NOT be considered without the applicant's signature.

1. I understand that any misrepresentation or omission of a fact in my application, accompanying documents or interviews may be justification for refusal of employment, or if employed, termination from employment.
2. I consent to a thorough investigation and to the consideration of any statements of references, former employers or others that are given in response to the inquiry.
3. I understand that an investigation may be made and information may be obtained through interviews with personal references and past employers, through a credit check, a criminal history check and/or a driver's record check.
4. I hereby give permission for any law enforcement agencies to release any information pertaining to any criminal arrests and convictions to PACE. Also, I give my permission for any agencies to release information for convictions of crimes related to child abuse and neglect.
5. I hereby release all parties, including but not limited to personal references and previous employers, from liability for any injury or damage that may result from their furnishing information concerning me or any action PACE takes on the basis of such information.
6. I understand that this application is not, and is not intended to be, a contract of employment and that any resulting employment is for no fixed period of time and is terminable at any time and for any reason by me or by PACE. I further understand that statements which may be contained in policies, practices, handbooks or other material do not create any guarantee of employment and that PACE has the right to modify, amend or terminate policies, practices, benefit plans or other programs within the limits and requirements imposed by law. I understand that no representative of PACE has the authority to enter into any employment agreement contrary to policies and that any such agreement must be in writing to be binding.

Child Abuse Declaration

We are required to collect information on: (1) all pending and prior criminal arrests and charges related to child sexual abuse and their disposition; (2) convictions related to other forms of child abuse and/or neglect; and (3) all convictions of violent felonies. Your declarations may **exclude**:

- (1) any offense committed before your 18th birthday which was finally adjudicated in a juvenile court or under a youth offender law (other than child abuse and/or child sexual abuse or violent felonies)
- (2) any conviction which the record has been removed under Federal or State law.

Individuals who declare that they have been arrested, charged with or convicted of any of the offenses listed above are not automatically disqualified from being hired.

I **have not** / **have** been arrested, charged and/or convicted on any of the above listed offenses.

Your date of birth is **required** to complete background investigations. Specific protected information will be kept confidential, and persons involved in the hiring process will **NOT** have access this page.

Signature (REQUIRED)

Date

Date of Birth (mm/dd/yyyy)

OPTIONAL: (Check as appropriate)

- | | | | | | |
|-----------------------------------|---------------------------------|---|--|---|--|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> American Indian | <input type="checkbox"/> Asian | <input type="checkbox"/> Black/African American | <input type="checkbox"/> Hispanic/Latino |
| | | <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Two or more races | <input type="checkbox"/> White | |
| <input type="checkbox"/> Disabled | | <input type="checkbox"/> Other Race _____ | | | |
| | | <input type="checkbox"/> Veteran/Disabled Veteran | | | |

THIS APPLICATION WILL NOT BE CONSIDERED ACTIVE AFTER 6 MONTHS