



WEST VIRGINIA PARENT TRAINING & INFORMATION

WV PTI APPLICATION FOR EMPLOYMENT

WV PTL Inc. is an equal employment opportunity employer.

Upon request, this form may be made available in an alternative format.

PLEASE TYPE OR PRINT CLEARLY

Personal History:

Name: _____ Social Security Number: _____

Present Address: _____ City: _____

State: _____ Zip Code: _____

Home Phone: _____ Other Phone Number: _____

Position Applied For: _____ Salary Required: _____

Do you have a valid driver's license? Yes No

Has your license been suspended or revoked? Yes No

Are you related to anyone working at WV PTI? Yes No

If, yes, give name and relationship: _____

Are you at least 18 years of age? Yes No

How did you learn of this employment opportunity? _____

Do you have the legal right to work in this country? Yes No

Have you ever been convicted of a crime, had adjudication of a crime withheld or pled *nolo contendere* to a crime? Yes No

If so, please explain: _____

Are you available for work Monday through Friday? Yes No

Are you available to work overtime, if required? Yes No

Education History:

(High School or GED) Year Graduated and School _____

(Post-Secondary Education) School and Major area of Study or Degree: _____

List any special skills, knowledge or ability you possess which may be relevant with the area of Special Education/disabilities and the position you are applying for (i.e. knowledge of computer hardware, software): _____

List any professional or occupational licenses, certifications or memberships you currently hold that may be relevant to the position applied for: _____

Employment History:

May we contact your present or most recent employer? Yes No

List all employment beginning with the most recent position:

Company Name: _____ Type of Business: _____

Address: _____

Supervisor's Name: _____

Job Title and Responsibilities _____ Telephone Number: () _____

Reason for Leaving _____

Dates of Employment: From: _____ To: _____

Company Name: _____ Type of Business: _____

Address: _____

Supervisor's Name: _____

Job Title and Responsibilities _____ Telephone Number: () _____

Reason for Leaving _____

Dates of Employment: From: _____ To: _____

Company Name: _____ Type of Business: _____

Address: _____

Supervisor's Name: _____

Job Title and Responsibilities _____ Telephone Number: () _____

Reason for Leaving _____

Dates of Employment: From: _____ To: _____

Company Name: _____ Type of Business: _____

Address: _____

Supervisor's Name: _____

Job Title and Responsibilities _____ Telephone Number: () _____

Reason for Leaving _____

Dates of Employment: From: _____ To: _____

References:

Please provide 3 references: Name, Address, Phone, Professional or Personal

1. Name: _____

Address: _____

Phone: () _____

2. Name: _____

Address: _____

Phone: () _____

3. Name: _____

Address: _____

Phone: () _____

AUTHORIZATION\AGREEMENT

I, hereby, authorize West Virginia Parent Training Information, Inc. and/or someone on its behalf to investigate my personal, employment, educational, criminal, driving or other background as may be necessary to arrive at an employment decision. I hereby release employers, schools, firms, persons and corporations from any and all liability in responding to inquiries in connection with my application and request that all those contacted provide WV PTI, Inc. with full and candid information.

Should I be selected for employment, I understand that:

1. Any employment will have a probationary period set by my employer. Completion of the probationary period may not result in further employment for any specific term.
2. Any employment is contingent on providing proof of legal authorization to work in this country.
3. Employment with West Virginia Parent Training Information, Inc. is at-will employment and I may terminate or be terminated at any time for any or no reason.
4. All employees are subject to drug testing and background check at time of hiring and periodically at the employer's discretion.

I hereby affirm that the information provided in this application, on my resume, or given during the interview process to be true and complete. I acknowledge that false information or omissions of information may disqualify me from further consideration for the position and may result in my termination from employment if it is discovered later that I supplied false information or made omissions on the application, on my resume or during the interview process. I understand that if I am employed by West Virginia Parent Training & Information, Inc., I am required to abide by all rules and regulations of my employer.

Signature: _____ Date: _____

*West Virginia Parent Training and Information, Inc., does not discriminate on the basis of race, color, religion, creed, sex, sexual orientation, gender identity, national origin, ancestry, age, veteran status, disability, genetic information, military service, or other protected status. It is our intention that all qualified applications be given equal opportunity and the selection decisions are based on job-related factors.

Please return completed form to:



WV PTI

99 Edmiston Way, Suite 101

Buckhannon, WV 26201