



Dear Applicant

Welcome to Trinity Youth Services.

Trinity is a premier provider of programs and services to children and families in California. We seek team members with a genuine commitment to the empowerment of at-risk children and their families, and a willingness to work in a highly demanding, fast paced environment, which requires dedication and a desire to provide positive role models for the children in our care.

We celebrate diversity and hire accordingly. We believe that training and career development are keys to employee retention and satisfaction and prefer to promote from within. Come join the Trinity team and help us continue to be a leader in providing services to children and their families.

The application process:

Successful completion and clearance of all the following procedures is required.

- Completed application form
- Résumé
- Personal Interview

If employment is offered, post-offer/pre-hire:

- Reference and background check
- Physical examination with drug testing
- Fingerprint clearance
- Must provide original High School Diploma or GED and if applicable, original College or University degree/diploma and/or official sealed transcripts.

If we decide to consider you for employment, you will be advised as to how to proceed through each phase of this process. To begin, please complete the attached application.

Since we are continually seeking exceptionally qualified professionals, we sincerely appreciate your interest in our Agency. If we can be of any assistance to you, please do not hesitate to call our office at (909) 825-5588.

*Trinity Youth Services is an Equal Opportunity Employer
and offers an excellent benefits package including health/dental/vision/life insurance,
education reimbursement, vacation/sick leave and 403(b) plans.*

PLEASE TYPE OR PRINT IN DARK INK ONLY

Last Name First Middle Applying for which position?



Human Resources
201 N. Indian Hill Blvd. Suite A-201
Claremont, CA 91711
(909) 825-5588
www.trinityys.org

APPLICATION FOR EMPLOYMENT

Date of Application _____
Interested in Full, Part-Time, On Call? _____
Shift or Hours Preferred _____
Hourly _____ Monthly _____
Wage Expectations _____

NOTE: All sections of this application must be completed even if a resume is attached. Incomplete applications may result in disqualification for consideration for employment.

Current Street Address City State Zip Code

Years at above Address Primary Phone Number Optional Secondary Phone # E-Mail Address

Drivers License/Identification Class: ____ State: ____ Number: _____ Date Expires: _____

Please answer ALL of the following questions:

1. Have you ever been employed by Trinity Youth Services? Yes ____ No ____
2. If employed would you be in a supervisory or subordinate relationship to any relative or member of your household? Yes ____ No ____
3. Can you safely perform the essential functions of the job for which you are applying, with or without reasonable accommodation? Yes ____ No ____
4. Can you, after employment, submit verification of your legal right to work in the U.S.? Yes ____ No ____
5. Do you now or will you in the future require sponsorship for a work visa? Yes ____ No ____
6. Do you understand that if an offer of employment is made and prior to commencement of employment, you will be required to meet all of the education requirements, take a medical examination, which includes drug screening, and a background check/fingerprint clearance, and that any offer of employment is contingent upon passing the medical exam, drug screening, and background check/fingerprint clearance? Yes ____ No ____

Equal Opportunity Employer

If you need a reasonable accommodation in the hiring process, please notify the person distributing or accepting this application.

EDUCATION: Applicants are required to furnish original High School Diploma or GED and if applicable, original College or University degree/diploma and/or official sealed transcripts and any academic training certificates applicable to the position being applied for.

HIGH SCHOOL ATTENDED	NUMBER OF YEARS	CERTIFICATION OR DEGREE AND DATE RECEIVED		
COLLEGES/TECHNICAL OR BUSINESS SCHOOLS ATTENDED (Name, Address, State, City)	MAJOR FIELD OF STUDY	UNITS		CERTIFICATION OR DEGREE AND DATE RECEIVED
Name: Address:		Qtr	Sem	
Name: Address:				
Name: Address:				

EXPERIENCE: Please account for all employment, including periods of unemployment, beginning with your current or most recent employer. In addition, please indicate any other experience that you feel is relevant to the position for which you are applying (military experience, volunteer or experience gained). Attach an additional sheet if extra space is needed. Trinity Youth Services reserves the right to rate candidates based on a review of the application materials, and to invite only the most qualified applicants to participate in successive parts of the selection process.

Employer: _____ Address: _____ Phone No. _____ Dates Employed: From _____ To _____	Job title held: _____ Supervisor's Name _____ Describe your duties: _____ _____ Reason for Leaving: _____
Employer: _____ Address: _____ Phone No. _____ Dates Employed: From _____ To _____	Job title held: _____ Supervisor's Name _____ Describe your duties: _____ _____ Reason for Leaving: _____
Employer: _____ Address: _____ Phone No. _____ Dates Employed: From _____ To _____	Job title held: _____ Supervisor's Name _____ Describe your duties: _____ _____ Reason for Leaving: _____
Employer: _____ Address: _____ Phone No. _____ Dates Employed: From _____ To _____	Job title held: _____ Supervisor's Name _____ Describe your duties: _____ _____ Reason for Leaving: _____

Please list three references (not relatives).

Name

Address

Telephone Number

1. _____
2. _____
3. _____

APPLICANT'S STATEMENT

Please read carefully. By signing below, you are certifying that you have read, fully understand, and accept all terms of this application.

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application, subject to legally-protected exceptions. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I authorize Trinity to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to Trinity any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure and hereby specifically waive any required written notification. In addition, I hereby release Trinity, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I also agree to execute all appropriate documents required for Trinity to obtain an "investigative consumer report" about me. I understand that if Trinity requests an investigative consumer report, I will receive a separate written notification and be provided the opportunity to request a copy of the report.

I agree that if employed, I will abide by all policies and procedures established by Trinity. I hereby acknowledge that, if hired by Trinity, my employment is "at will," that I may resign at any time, and Trinity may terminate my employment at any time, with or without cause, with or without notice, and without further obligation or liability. I understand that the terms of my employment under this paragraph cannot be modified except by written agreement dated and signed by Trinity's CEO. This paragraph incorporates all prior discussions and understandings between myself and Trinity.

I understand that all disputes arising out of my employment with Trinity will be resolved by binding arbitration and that, if hired, I will be presented with an arbitration agreement.

Applicant's Name (Please print)

Signature of Applicant

Date

VOLUNTARY APPLICANT SELF-IDENTIFICATION RECORD

The employer is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites employees to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

All information that is provided will be used only for record-keeping purposes. Further, such information will be kept separate from the employment application and the employee's main personnel file. This form will be on file at the Corporate Office only.

Please print your answers:

Name:
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I choose not to self-identify
<p>Race/Ethnicity: <i>(Check one)</i></p> <ul style="list-style-type: none"><input type="checkbox"/> American Indian or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.<input type="checkbox"/> Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.<input type="checkbox"/> Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.<input type="checkbox"/> Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.<input type="checkbox"/> White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.<input type="checkbox"/> Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.<input type="checkbox"/> Two or More Races (Not Hispanic or Latino): All persons who identify with more than one of the above five races.<input type="checkbox"/> I choose not to self-identify.
Trinity Youth Services is an <i>Equal Opportunity Employer</i>

REFERRAL INFORMATION

Please print your answers:

Name: _____
Position Applied For: _____
<p>How did you hear about this vacancy? <i>(Check one and complete)</i></p> <ul style="list-style-type: none"><input type="checkbox"/> Current Employee <i>(Please specify)</i> _____ <input type="checkbox"/> Publication <i>(Please specify)</i> _____ <input type="checkbox"/> Job Announcement <i>(Where posted)</i> _____ <input type="checkbox"/> Career Fair <i>(Please specify)</i> _____ <input type="checkbox"/> Visit to the Human Resources Office <input type="checkbox"/> TV <input type="checkbox"/> Internet: www.trinityys.org <input type="checkbox"/> Other: _____
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This Organization Participates in E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact DHS and/or the SSA before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants and may not limit or influence the choice of documents you present for use on the Form I-9.

To determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo matching tool to match the photograph appearing on some permanent resident cards, employment authorization cards, and U.S. passports with the official U.S. government photograph. E-Verify also checks data from driver's licenses and identification cards issued by some states.

If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the employment eligibility verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 800-255-7688, 800-237-2515 (TDD) or at www.justice.gov/crt/osc.

E-Verify Works for Everyone

For more information on E-Verify, please contact DHS:

888-897-7781

www.dhs.gov/E-Verify

NOTICE:

Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.



E-VERIFY IS A SERVICE OF DHS AND SSA

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Esta organización participa en E-Verify



Este empleador proporcionará a la Administración del Seguro Social (SSA, por sus siglas en inglés) y, de ser necesario, al Departamento de Seguridad Nacional (DHS, por sus siglas en inglés) la información incluida en el Formulario I-9 de todo empleado nuevo con el propósito de confirmar su autorización de trabajo.

IMPORTANTE: Si el gobierno no puede confirmar que usted tiene autorización para trabajar, el empleador debe suministrarle las instrucciones por escrito y darle la oportunidad de ponerse en contacto con DHS o SSA antes de sancionarlo de cualquier forma o finalizar la relación laboral.

Los empleadores no pueden utilizar E-Verify para realizar preselecciones de solicitantes y no pueden limitar ni influenciar la selección de los documentos que usted presente para su inclusión en el Formulario I-9.

Para determinar si los documentos incluidos en el Formulario I-9 son válidos, este empleador utiliza la técnica de comparación fotográfica para comparar la fotografía que aparece en las Tarjetas de Residente Permanente, Tarjetas de Autorización de Empleo y pasaportes de los EE. UU. con la fotografía oficial del gobierno de los EE. UU. Asimismo, E-Verify verifica los datos incluidos en licencias de conducir y tarjetas de identificación emitidas por algunos estados.

Si considera que su empleador ha infringido sus responsabilidades en virtud de este programa o lo ha discriminado durante el proceso de verificación de la elegibilidad de empleo por su origen nacional o estatus de ciudadanía, comuníquese con la Oficina del Consejero Especial llamando al 800-255-7688, 800-237-2515 (para personas con impedimentos auditivos) o visitando www.justice.gov/crt/osc.

E-Verify funciona para todos

Para obtener más información sobre E-Verify, comuníquese con DHS al:

888-897-7781

www.dhs.gov/E-Verify

AVISO:

La ley federal exige a todos los empleadores que verifiquen la identidad y la elegibilidad de empleo de todas las personas contratadas en los Estados Unidos.



E-VERIFY IS A SERVICE OF DHS AND SSA

El logotipo y la marca de E-Verify son marcas registradas del Departamento de Seguridad Nacional. Queda estrictamente prohibida la venta comercial de este afiche.