

APPLICATION FOR EMPLOYMENT

This application will be considered current for 60 days.

In compliance with federal and state employment opportunity laws, all qualified applicants will be considered for all positions without regard to race, color, religion, ethnicity, gender, national origin, age, sex, marital status, disability, veteran status, or sexual orientation.

| | | |
|---|---------------------------|--|
| Date of Application: | Positions(s) Applied For: | Date Available for Work: |
| Referral Source <input type="checkbox"/> Advertisement <input type="checkbox"/> Employee <input type="checkbox"/> Agency <input type="checkbox"/> Other | | Available for Work <input type="checkbox"/> Full Time <input type="checkbox"/> Evenings <input type="checkbox"/> Part Time <input type="checkbox"/> Weekends |
| Name (Last, First, Middle) | | Social Security Number |
| Address (Street, City, State, Zip Code) | | Home Phone #: Work Phone #: Email Address: |

| | |
|---|--|
| Are You Over 18 Years of Age? <input type="checkbox"/> Yes <input type="checkbox"/> No | Have You Been Employed Here Before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give prior dates of employment: |
| Have you been convicted of a crime in the past 7 years or are there any felony charges pending against you? <input type="checkbox"/> Yes <input type="checkbox"/> No | If Yes, describe in full, including date(s). A conviction record will not necessarily bar you from employment. |
| Have you ever been dismissed or asked to resign from employment? <input type="checkbox"/> Yes <input type="checkbox"/> No | If Yes, please explain fully. |
| Did any dismissal or requested resignation involve child abuse, neglect, or any act of aggression? <input type="checkbox"/> Yes <input type="checkbox"/> No | If Yes, please explain fully. |

| | | | |
|---|------------|---------|-------|
| REFERENCES (List 3 professional references other than relatives) | | | |
| Name | Occupation | Address | Phone |
| | | | |
| Name | Occupation | Address | Phone |
| | | | |
| Name | Occupation | Address | Phone |
| | | | |

EMPLOYMENT EXPERIENCE

Resume Attached ___ yes ___ no
 May we contact your current employer ___ yes ___ no ___ please wait until I am a finalist

List the last three positions you have held beginning with your present or most recent job including phone numbers.

| | | | | |
|------------------------|-------------------|-------------------|----------------------|---------------------------|
| EMPLOYER'S NAME | | POSITION | | DUTIES? |
| ADDRESS | | DATE HIRED | STARTING RATE | |
| PHONE NO. | SUPERVISOR | DATE LEFT | ENDING RATE | WHY DID YOU LEAVE? |
| EMPLOYER'S NAME | | POSITION | | DUTIES? |
| ADDRESS | | DATE HIRED | STARTING RATE | |
| PHONE NO. | SUPERVISOR | DATE LEFT | ENDING RATE | WHY DID YOU LEAVE? |
| EMPLOYER'S NAME | | POSITION | | DUTIES? |
| ADDRESS | | DATE HIRED | STARTING RATE | |
| PHONE NO. | SUPERVISOR | DATE LEFT | ENDING RATE | WHY DID YOU LEAVE? |

EDUCATION AND TRAINING

| Type of School | Name and Location of School | Major | Degrees | Circle Last Year Completed |
|-----------------|-----------------------------|-------|---|----------------------------|
| High School | | | Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED | 9 10 11 12 |
| College | | | | 1 2 3 4 |
| Graduate School | | | | 1 2 3 4 |

Licenses and Certifications

| License/Certification | Issuing Body | Expiration Date |
|-----------------------|--------------|-----------------|
| | | |
| | | |
| | | |
| | | |

Certification

I hereby declare that the information provided by me in this application, my resume or by personal interview is true, correct and complete to the best of my knowledge. I understand that if B & D Behavioral Health employs me any misstatement or omission of fact on this application shall be cause for dismissal. I authorize B & D Behavioral Health to obtain investigative reports containing information as to my character, personal characteristics, and work experience and to conduct reference checks, with former employers or other persons named in this application, for the purposes of providing the Company with any relevant information required for employment. I release all persons contacted by B & D Behavioral Health during the hiring process from any liability for any damage whatsoever resulting from giving the company any lawful information. Should B & D Behavioral Health employ me I authorize its representatives to furnish information regarding my employment at the Company if such information is requested in the future. I release B & D Behavioral Health and its representatives from any liability for any damage whatsoever resulting from furnishing this information.

I understand and acknowledge that if employed, my employment with B & D Behavioral Health will be "at will", meaning that either I or B & D Behavioral Health may terminate my employment at any time for any reason or no reason, unless the "at will" arrangement is modified by a written agreement signed by both myself and the President of B & D Behavioral Health I acknowledge that I do not rely and have not relied on any representations or statements made by B & D Behavioral Health or any of its agents or representatives, whether oral or written, that are inconsistent with, or differ in any way from, the statements presented in this application. I understand that no agent or representative of B & D Behavioral Health, other than the President, has any authority to enter into any agreement, oral or written, for employment for any specified period of time or to make any agreement, or assurances contrary to the "at will" nature of the employment relationship. I also understand that this application is not a contract of employment.

Signature of Applicant

Date

****to be given to EACH applicant/employee by employer/company *keep on file****

****Do not forward to BYH****

DISCLOSURE

[Employer] ("Company") may obtain information about you from a consumer reporting agency (CRA) for employment purposes. For the purposes of this disclosure and authorization, "employment" also includes retaining or engaging you to provide services to or for the Company. The information obtained is referred to as a consumer report, which generally is information concerning your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected for the purpose of establishing your eligibility for employment with Company. An investigative consumer report may also be obtained; in this type of report, the same information is obtained regarding your character, general reputation, personal characteristics, or mode of living, but it is obtained through personal interviews with your friends, neighbors, or associates; however, Before You Hire, Inc. does not process any type of investigative consumer report. The reports may contain information regarding your criminal history, driving records, and verification of your employment history, education, social security number and other background information.

A consumer report may be obtained at any time during the application process with Company, or, if hired or otherwise engaged to provide services, at any time during your employment. Thus, you may be the subject of a consumer report. You have a right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any consumer report, and a copy of the report.

Please be advised that the nature and the scope of the most common form of consumer report obtained with regard to applicants for employment is an investigation into your employment history conducted by Before You Hire, Inc., 2117 Simonton Road, Suite 101, Statesville, NC 28625, (704) 878-3600, who is a third-party organization hired by Company to conduct the investigation.

You should carefully consider whether to exercise your right to request disclosure of the nature and scope of any consumer report.

AUTHORIZATION

To the extent permitted by federal and state law, I hereby consent and authorize Company, its subsidiaries, affiliates, other related entities, successors and/or assigns, and Before You Hire, Inc. ("CRA") to procure a: CONSUMER REPORT, as described above in the Disclosure, for the purpose of establishing my eligibility for employment with Company. My authorization remains valid throughout my employment with the Company. To the extent permitted by applicable law, I agree Company can procure additional consumer reports during my employment without providing additional disclosures or obtaining additional authorizations; further, I hereby consent and authorize, without reservation, any law enforcement agency, administrator, state or federal agency, military branch, school or university (public or private), information service bureau, past or present employer or supervisor, and/or private business, to furnish all background information requested by Before You Hire, Inc., additional third-party organizations acting on behalf of the Company and/or the Company itself.

Applicant Signature

Date

RELEASE OF INFORMATION * to be uploaded online *

I acknowledge that I have received the Disclosure and Authorization, A Summary of Your Rights Under the Fair Credit Reporting Act, and any additional State Law notices provided based upon, where the Company may employ me. I have reviewed and understand the information, statements, and notices in all the disclosures provided to me, including this Release. I agree that a facsimile ("fax") or a digital copy of the forms completed by me shall be as valid as the original. I understand that the information regarding sex, race, and date of birth are for the sole purpose of gathering the information accurately and will not be used to discriminate against me in violation of any law. I understand that if I am hired or otherwise engaged or selected by the Company for its stated purpose, a consumer report will have been conducted on me. I hereby release and hold harmless the Company and Before You Hire, Inc. from any and all liabilities or damages that might occur from any information obtained through the procurement of my consumer reports.

Personal Identifying Information Required for Background Check *please print CLEARLY*

| | | |
|---|---------------------|---|
| First Name | Middle Name | Last Name |
| List any other name used in the last 7 years (Maiden name) <small>[automatically processed]</small> | | |
| Social Security No. | Date of Birth | <input type="checkbox"/> Check here if under age 18 – Further Action Required |
| Street Address | | |
| City | State | Zip Code |
| County | Drivers License No. | State of DL <i>CDL: Y / N</i> |
| Gender | Race | Phone No. |

List other cities or towns that you have lived in the last 7 years:

| | | |
|-------------------------------|----------|--------|
| Date of #1 Previous Residence | | State |
| City | Zip Code | County |
| Date of #2 Previous Residence | | State |
| City | Zip Code | County |

Applicant/Employee Signature _____ **Date** _____

****EMPLOYER ORDERING INSTRUCTIONS ONLY****

LOG ON TO BEFOREYOUHIREINC.COM – CLICK ON THE LOGIN BUTTON, USING YOUR CREDENTIALS, INPUT ALL NECESSARY INFORMATION. FURTHERMORE - PLEASE UPLOAD THIS DOCUMENT ONLY TO THE ONLINE PORTAL.

BEFORE YOU HIRE, INC. P: 704.878.3600 F: 704.878.0990 www.beforeyouhireinc.com

