

The Arc of Putnam County, Inc.

1209 Westover Drive Palatka, FL 32177

Phone: 386-325-2249 Fax: 386-3253527

Employment Application

The Arc of Putnam County, Inc. is an equal opportunity employer, dedicated to non-discrimination in employment on the basis of race, color, religion, sex, national origin, handicap, age, disability, and marital status. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by local, state, or federal law.

	☐ Mr. Last N ☐ Mrs. ☐ Ms.	ame First 1	Name	Middle	Date			
	Street Address					Social Security Number		
Personal	Apartment Number					Home Phone Number		
ersc	City	State		Zip	Cell I	Phone Num	ber	
Pe	Email Address					Business Phone Number		
	Only U.S. citizens or other pemployment. Can you, up legal right to work in the U.			of age or older?				
Position	Position Applied for	Date Available to Work		W	Wage or Salary Desired			
	Have you ever applied with The Arc of Putnam County before? Yes No Is so, where/when?							
		Name and Location	of School	Did you Grad	luate?	Degree or Diploma*	Course of Study	
u	High School			□Yes □	No			
Education	College			☐ Yes ☐	No			
	Graduate School			☐ Yes ☐	No			
Ed	GED or Other Professional Certification(s) or Training			□Yes □	No			
	Trade Business or Correspondence Courses			□Yes □	No			

^{*}A copy of your High School Diploma or G.E.D. will be required. A certified copy of your college transcript will be required for consideration of any degreed position.

Employment

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

Company Name	Telephone Number
Address	Employed (Month and Year) From To
Name of Supervisor	Starting Ending Salary Salary
Job Title	Other Compensation
Key Responsibilities and Accomplishments	Reason for Leaving
Company Name	Telephone Number
Address	Employed (Month and Year) From To
Name of Supervisor	Starting Ending Salary Salary
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Name of Supervisor	Starting Ending Salary Salary
Job Title	Other Compensation
Key Responsibilities and Accomplishments	Reason for Leaving

Additional Background Information

Please provide the names of three references:

Name:	Relationship:	Phone Number and Address:			
Name:	Relationship:	Phone Number and Address:			
Name:	Relationship:	Phone Number and Address:			
During your employment with other employers used a different name? If so, list other names:	, or during the education listed on you	ur application and/or resume, have you ever worked under or Yes			
Please explain any gaps in your employme	nt history.				
Have you received any written reprimands or disciplinary suspensions during any previous employment? Yes No If yes, explain.					
Have you ever been discharged or asked to If yes, explain.	resign?	☐ Yes ☐ No			
п уез, ехріапі.					
Have you ever been convicted of, pled no					
(A conviction or plea record will not necessarily disqualify an applicant for employment) If so, state the nature of the offense(s), date(s), city and state and disposition. Attach a separate sheet if you need more space.					
Have you ever been a defendant in a civil court for an intentional tort (e.g., a civil wrong, assault, battery, fraud)? (A conviction or plea record will not necessarily disqualify an applicant for employment) If yes, for each action please specify the following: (a) The nature of the civil action against you; and (b) the outcome of the action.					
non-solicitation, non-disclosure or confidentiality	Do you have a contract with your current or a recent employer which has a post-termination non-compete Yes No non-solicitation, non-disclosure or confidentiality provisions? If yes, please attach a copy or, if not available, describe the limitations or restrictions that would affect you if hired by The Arc of Putnam County.				

DRIVING RECORD:

Do you have a valid o	Iriver's license?	Yes No	What class of licen Driver's license N	se do you possess? _ umber:		
Have you ever had yo	our license or drivin	g privileges re	voked, suspended, or p	placed on probation?	Yes No	
If yes, please explain	(include when, w	here and wha	t action was taken): _			
						_
How many speeding	or other moving v	olations have	you received in the last	t three (3) years?		
List below all traffic vio (use additional pages		king) on your r	ecord for the last five (5)) years and all motor v	vehicle accidents i	n which you were involved
Date	Location		Descriptoin		Result	
		1				
		Drive	r's Licens	e Check		
As an applicant for em license records.	ployment with The		County, I hereby author		n County to obtai	n a check of my driver
Driver License Numbe	er			State		
Applicant's Signature						

EMPLOYMENT APPLICATION CERTIFICATION

I hereby certify that all of the facts and information listed on this employment application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete, or misleading information discovered on this application at any time after I am employed may result in my dismissal.

I hereby authorize the Company or independent contractor to investigate all statements contained in this application, to interview the references and previous employers listed in this application, and to obtain a report from a consumer reporting agency to be used for employment purposes in accordance with the Fair Credit Reporting Act. I authorize the references and previous employers listed to give the Company all facts, opinions and evaluations concerning my previous employment and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to the Company, including, but not limited to, any liability for defamation or invasion of privacy.

If I am offered employment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and/or Company medical examination or inquiry, including a drug screen test. If then employed, I understand that I will be required to serve a ninety (90) day probationary period. I further understand that my employment and compensation can be terminated, with or without cause or notice, at any time, regardless of the successful completion of my probationary period, at the option of either the Company or myself. I understand that no supervisor or other representative of the Company other than the President of the Company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand and voluntarily agree as a condition of employment or my continued employment, that I may be requested by the Company to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for employment, or if I am then employed, may result in my immediate dismissal.

	I certify that I have read, understand and agree with the above.
Date	Signature of Applicant

AN OVERVIEW OF THE ARC OF PUTNAM COUNTY FACILITIES AND PROGRAMS

FACILITY NAME	FACILITY CHARACTERISTICS
Carole Rd. Lundy Rd.	Small behavioral homes serving residents who display challenging behavioral patterns. There are approximately 4-6 occupants per home.
Husson Apartments	A supervised apartment setting. Some residents have challenging behaviors. There are 4 units with 2 occupants per unit.
Kennedy Street	A group home specializing in severe, profound disabilities. Behavioral problems are sometimes encountered. There are approximately 12 occupants.
Westover Group Home	A group home focusing on the needs of residents having ambulation and other physical challenges. Behavioral problems are sometimes encountered. There are approximately 9 occupants.
Silver Lake Drive	A small group home focusing on the needs of older residents. Behavioral problems are rarely encountered. There are approximately 6 occupants.
Tyrrell Oaks	An assisted living facility. Residents live in individual apartments in a complex consisting of 12 units. Focus is on supporting independence as much as possible while providing supervision and needed supports. Behavioral problems are rarely encountered.
Palm Avenue Workshop	This workshop offers piecework contracts to provide work experience and work skill training opportunities for the consumers. The workshop operates Monday through Friday.
Whittaker Workshop	This workshop environment focuses on developing living skills and enhancing consumer education. The workshop operates Monday through Friday.
Supported Living Program	This program concentrates on supporting individuals to live as independently as possible in their own homes throughout the community.
Community Based Employment	This program concentrates on placing consumers into jobs in local businesses such as restaurants, factories and janitorial contracts. These employment opportunities support developing consumer independence.
Psycho - Social Rehabilitation	This service provides group activities and training to assist individuals with mental health challenges. It operates within the Whittaker Center and Palm Avenue Center Adult Day Training Programs.



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To: Putnam County Sheriff's Dept.

PO Drawer 1578

Palatka, FL 32178 -1578

Local Background Check

The individual listed below has applied for a position covered under Chapter 85 - 54, Laws of Florida, and is required to have a local law enforcement check. Please provide any information you have in your recorthis individual. Your cooperation and assistance in this matter is greatly appreciated.

Subject Name:				
Address:				
Date of Birth: Social Security #:	Race: Sex:			
Results of Investigation:				
Applicant to complete the following	g:			
I hereby authorize the above facility to check any and all records pertaining to criminal convictions and for any law enforcement agency to release information regarding convictions under Florida Statutes or statutes of other jurisdictions.				
Date: Applie	ant Signature:			