

ROOFTOP OF VIRGINIA CAP, INC.
EMPLOYMENT APPLICATION

ROOFTOP OF VIRGINIA CAP, INC. OFFERS EQUAL EMPLOYMENT OPPORTUNITIES TO ALL PERSONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP STATUS, AGE, PHYSICAL OR MENTAL DISABILITY, MARITAL STATUS, OR PAST, PRESENT OR FUTURE SERVICE IN THE UNIFORMED SERVICES OF THE U.S., OR ANY OTHER LEGALLY PROTECTED STATUS.

NAME _____ **DATE** _____
Last First Middle

ADDRESS _____
Number & Street City State Zip Code

DAY PHONE _____ **ALTERNATE PHONE** _____ **E-MAIL** _____

POSITION(S) APPLIED FOR _____

Walk-in ___ **EHS/HS Parent** ___ **Current Rooftop Volunteer/Intern** ___ **Current Work Experience Participant** ___

Availability: Full-time ___ Part-time ___ Temporary ___ Shift Work ___

Have you applied with us before? Yes ___ No ___

Have you worked for us before? Yes ___ No ___

If yes, please provide dates, positions held _____

Are you at least 18 years of age? Yes ___ No ___ (EMPLOYMENT IS SUBJECT TO VERIFICATION OF MINIMUM LEGAL AGE)

Are you legally authorized to work in the United States? Yes ___ No ___

(Documented proof of identity and eligibility for employment in the US is required, such as a driver's license, Social Security Card, Birth Certificate and/or Immigration and Naturalization Service Documents)

If the position applied for requires driving, do you have an appropriate license? Not Applicable ___ Yes ___ No ___

If the position applied for requires overnight travel or an ability to work unusual hours, can you meet that requirement?

Not Applicable ___ Yes ___ No ___

How soon can you report to work? _____

EDUCATION

SCHOOLS: NAME/LOCATION	YEARS COMPLETED	DIPLOMA/DEGREE	STUDIES
High School _____			
College/University _____			
College/University _____			
Technical/Other _____			
Honors/Awards _____			

SPECIALIZED TRAINING, JOB-RELATED SKILLS

Include apprenticeships, extracurricular activities, qualifications from employment and other experiences.

PROFESSIONAL/TRADE/BUSINESS/ CIVIC ORGANIZATIONS

You may exclude those that could tend to indicate race, color, religion, national origin, disability, or other protected status.

REFERENCES

List three references other than previous employers, relatives, and current employees.

Name _____	Address _____	Phone _____
Name _____	Address _____	Phone _____
Name _____	Address _____	Phone _____

EMPLOYMENT HISTORY

List your entire employment history and account for any gaps in employment.

List last or present employer first, including military service. If you need additional space, please attach a separate sheet of paper.

Employer _____	Phone _____
Address _____	May we contact Yes ___ No ___
Position _____	Supervisor _____

Dates of Employment _____
Duties/Responsibilities _____

Reason for Leaving _____

Employer _____ Phone _____
Address _____ May we contact Yes ___ No ___
Position _____ Supervisor _____
Dates of Employment _____
Duties/Responsibilities _____

Reason for Leaving _____

Employer _____ Phone _____
Address _____ May we contact Yes ___ No ___
Position _____ Supervisor _____
Dates of Employment _____
Duties/Responsibilities _____

Reason for Leaving _____

APPLICANT'S CERTIFICATION AND AGREEMENT

This application shall be considered active for not more than 45 days. After that time, applicants will be required to complete a new application form.

I certify that the information contained in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or omission of any facts on my application, resume, or during any interview, may result in refusal of employment or, if employed, termination from Rooftop of Virginia CAP, Inc.'s employment. I understand that Rooftop of Virginia CAP, Inc. may check on job references and other information. I authorize my former employers and others to give information to Rooftop of Virginia CAP, Inc. and hereby release my former employers, others supplying information and Rooftop of Virginia CAP, Inc. its employees and agents from any liability whatsoever from such disclosure.

As a condition of employment, I will submit to a Criminal Background Check, Child Protective Services review, driving record background review, and employment reference checks. I agree to fully release and discharge Rooftop of Virginia CAP, Inc. its Administrative Board, its director, employees, and any associates from any and all claims, demands, damages, rights of action, or causes of action, present or future, resulting from any of these background checks.

I understand that Rooftop of Virginia CAP, Inc. policy prohibits the hiring of any applicant who uses illegal and/ or unauthorized drugs. I hereby agree to submit to a drug screening as per Rooftop of Virginia CAP, Inc. Inc. policy, and I agree to the release of the test results and other relevant medical information to Rooftop of Virginia CAP, Inc. for appropriate review, while holding harmless Rooftop of Virginia CAP, Inc. its Board of Directors, its director, supervisors, employees, and agents from any and all liability in connection with the testing and results of the test.

I understand that Rooftop of Virginia CAP, Inc. requires for me to have a valid driver's license, and that if my position requires, I will obtain a CDL within 60 days of hire date. I also understand that this job may/ will require out of town training.

I am stating that the following person/people are related to me and work for Rooftop of Virginia CAP, Inc.:

Name _____ Relation _____

Name _____ Relation _____

I understand that if an offer of hire is made, this offer will be contingent upon the results of the above mentioned background checks and drug screening. If employed, I agree to abide by all rules and regulations of Rooftop of Virginia CAP, Inc.

In the event I am employed, I acknowledge that any such employment is at will and that employment and compensation can be terminated with or without cause and with or without notice at any time at the option of Rooftop of Virginia CAP, Inc. or myself. I understand that no representative other than the President 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, and any representations contrary to the foregoing are expressly disavowed, shall not be binding upon and should not be relied upon by any prospective or existing employee, unless made in writing and signed by the President. I further acknowledge that any personnel manual, handbook, publication, policy, procedure, rule or regulation that may now or in the future apply to me is not contractual in nature and does not modify the foregoing at-will employment relationship.

Signature of Applicant _____ Date _____