



# Employment Application

Today's Date: \_\_\_\_\_

## Application Information

Full Name: \_\_\_\_\_  
Last First M.I.

Date of Birth: \_\_\_\_\_  
MM/DD/YYYY

Address: \_\_\_\_\_  
Street Address Apartment / Unit #

\_\_\_\_\_ City State ZIP Code

Cell Phone: \_\_\_\_\_ Cell Carrier: \_\_\_\_\_ Crossroads: \_\_\_\_\_

Email: \_\_\_\_\_ Preferred Contact Method: Email  Text  Both

How did you hear about Lexington? \_\_\_\_\_ Social Security No.: \_\_\_\_\_

## PERSONAL STATEMENT

WE WANT TO KNOW WHY YOU CHOOSE TO WORK IN BEHAVIORAL HEALTH AND SPECIAL NEEDS - LEXINGTON IS DIFFERENT - TELL US WHAT IS DIFFERENT ABOUT YOU?

## Education

High School: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Diploma: \_\_\_\_\_

Higher Education: \_\_\_\_\_ Degree in: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Name of school: \_\_\_\_\_

*Please check any of the following certifications that you currently have (bring copies to your interview)*

Current Certifications: Fingerprint Card: Yes  No

Prevention and Support: Yes  No

First Aid: Yes  No  Habilitation: Yes  No

Registered Behavioral Health Tech: Yes  No

CPR: Yes  No  Article 9: Yes  No

**Employment Application****Experience With Special Needs**Have you worked with a Special Needs Agency before? Yes  No 

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Explain your work history with Special Needs: \_\_\_\_\_

**Employment History****Employer 1:**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? Yes  No **Employer 2:**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

**Disclaimer and Signature***I certify that my answers are true and complete to the best of my knowledge.**If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Note: must be signed with blue or black pen or electronically*