

Volunteer Application

Lifeline Connections is an equal opportunity employer, dedicated to ensuring that no person shall be discriminated against on any basis, including race, color, age, gender, religion, national origin, the presence of mental, physical, or sensory disability, sexual orientation, or any other basis prohibited by federal, state, or provincial law.

Lifeline Connections is committed to achieving an alcohol and drug-free workplace. Alcohol and other drug abuse is a significant public health problem and has a detrimental effect on decreased productivity, injuries, theft and absenteeism. Accordingly, we have an obligation to maintain a safe, healthy and productive working environment and to protect the company's property, operations and reputation by establishing a drug-free workplace program. Therefore, a pre-employment, random, and for cause drug screen policy will be enforced. All employment offers are pending satisfactory pre-employment drug test results.

Please complete the entire application to ensure processing.

Position Applying for: _____ Application Date: _____

Read each question carefully, print clearly, and answer to the best of your ability.

General Information

Name: _____
Last First Middle

Address: _____
Street City State Zip

Primary Phone: () _____ Secondary Phone: () _____

How did you hear about this position? _____

Skills, Training, and Certifications

Tell us about any certifications or licenses you hold (e.g. CDP, CNA, 1st Aid, CPR, etc.) and include the license number:

Briefly tell us why you think you would make a good addition to our team:

Computer Experience: Windows Word Excel Outlook Medisoft Netsmart Powerpoint Target

Education

	Name and Location of School	Years Completed	Graduate	Degrees Received
High School	_____	1 2 3 4	Y N	

College/University	_____	1 2 3 4	Y N	

College/University	_____	1 2 3 4	Y N	

Other	_____	1 2 3 4	Y N	

Employment History

May we contact your current employer? Yes No

List your previous work experience starting with the most recent; include any military service and/or volunteer work.

Company Name: _____ Phone Number: (_____) _____

Address: _____ City, State, Zip: _____

Supervisor: _____ From (mo/yr): _____ To (mo/yr): _____

Job Title: _____ Ending Salary: _____ Per: _____

Main Job Functions: _____

Reason for Leaving: _____

Company Name: _____ Phone Number: (_____) _____

Address: _____ City, State, Zip: _____

Supervisor: _____ From (mo/yr): _____ To (mo/yr): _____

Job Title: _____ Ending Salary: _____ Per: _____

Main Job Functions: _____

Reason for Leaving: _____

Company Name: _____ Phone Number: (_____) _____

Address: _____ City, State, Zip: _____

Supervisor: _____ From (mo/yr): _____ To (mo/yr): _____

Job Title: _____ Ending Salary: _____ Per: _____

Main Job Functions: _____

Reason for Leaving: _____

Authorization to Investigate Employment History

I hereby authorize Lifeline Connections to thoroughly investigate my background, references, employment record and other matters related to my suitability for employment. I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by Lifeline Connections to provide any relevant information regarding my current and/or previous employment and I release all persons, schools, employers of any and all claims for providing such information.

Applicant Signature

Date

Background Check Notification

We are required to notify you that we plan to conduct a criminal background check for the purposes of employment and/or contracting and/or student placement and/or volunteer screening consistent with RCW 43.43. Pursuant to this statute, you are required to answer the following questions "yes", or "no" and to disclose in writing all crimes against children or other persons and all crimes relating to financial exploitation as defined in RCW 43.43.830 in which the victim was a vulnerable adult. An arrest or conviction does not necessarily disqualify you from employment. Circle "yes", or "no" after each question:

Instructions: Each question must be answered, do not leave any space blank.

Name: _____ Date of Birth: _____
Last First Middle Month / Day / Year
All Previous or Alias Names (Include maiden): _____ SSN: _____

1. Have you ever been convicted of any crime?

→ Yes No

2. Have you ever been convicted of any crime against children or other persons?

→ Yes No

3. Have you ever been convicted of or found by a court in a protection proceeding under chapter 74.34 RCW to have abused or financially exploited a vulnerable adult?

→ Yes No

4. Have you ever been convicted of crimes related to drugs as defined in RCW 43.43.830 ("crimes relating to drugs means a conviction of a crime to manufacture, deliver, or possession with intent to manufacture or deliver a controlled substance.")?

→ Yes No

5. Have you ever been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused a minor?

→ Yes No

6. Have you ever been found in court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?

→ Yes No

7. Have you ever been found by any disciplinary boards final decision to have sexually or physically abused or exploited any minor or developmentally disabled person or to have abused financially or exploited any vulnerable adult?

→ Yes No

As a condition of my candidacy for employment, contracting, student placement, and or volunteer placement with Lifeline Connections, I understand that a state and/or federal criminal background check will be conducted. By signing this Acknowledgement and Authorization I authorize Lifeline Connections to access such information as may be necessary to complete a criminal background check. I release from liability all persons and entities supplying such information and indemnify Lifeline Connections against any liability which may result from making such requests and I fully understand the terms of this Acknowledgment and Authorization.

I certify that all statements given on this application are correct. I realize that falsification or misrepresentation, including omission, of this or any other personnel record may result in my discharge regardless of when such falsification or misrepresentation or omission is discovered. In the event of employment, I agree to abide by all present and subsequently issued rules of the company, and recognize that my employment is at will and can be terminated at any time by me or by the company with or without cause, other than for a reason which is prohibited by law. I understand that (except for a written employment agreement for a fixed term) no representative of the company has authority to enter into any agreement with me for a specified period of time, or that is not terminable at will by me or the company, or to make representations contrary to the foregoing. Also, I certify that I am able to perform the essential functions of the job with or without reasonable accommodation.

Applicant Signature

Date