



# APPLICATION FOR EMPLOYMENT

ABOUT OUR KIDS, INC

WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, MARITAL OR VETERAN STATUS, OR ANY OTHER LEGALLY PROTECTED STATUS.

## APPLICANT INFORMATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_ PHONE # \_\_\_\_\_

POSITION DESIRED \_\_\_\_\_ DATE AVAILABLE TO START \_\_\_\_\_

Level of education:

HIGH SCHOOL/GED    SOME COLLEGE    ASSOCIATE'S    BACHELOR'S    MASTERS    PHD

## PREVIOUS EMPLOYMENT

COMPANY \_\_\_\_\_ JOB TITLE \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

DATES EMPLOYED \_\_\_\_\_ PHONE \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

COMPANY \_\_\_\_\_ JOB TITLE \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

DATES EMPLOYED \_\_\_\_\_ PHONE \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

COMPANY \_\_\_\_\_ JOB TITLE \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

DATES EMPLOYED \_\_\_\_\_ PHONE \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

## EXTRAS

OTHER PERTINENT SKILLS OR EXPERIENCE \_\_\_\_\_

WHY DO YOU WANT TO WORK AT AOK? \_\_\_\_\_

### AOK HQ

208 W. 10TH ST  
LAMAR, MO 64759

### WOLF BUILDING

801 E. 12TH ST  
LAMAR, MO 64759

### NATHAN'S PLACE

1005 GULF ST  
LAMAR, MO 64759

F 417.681.0514  
P 417.682.6002

**AOKYOUTH.ORG**



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## EMERGENCY CONTACT

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

## REFERENCES

Please list three references other than a relative or previous employer.

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

OCCUPATION \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

OCCUPATION \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

FULL ADDRESS \_\_\_\_\_

OCCUPATION \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

## AGREEMENT

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure can be grounds for rejection of application or, if I am employed by this company, terms for my immediate expulsion from the company.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## AUTHORIZATION FOR BACKGROUND CHECK

Please complete your application by reading and providing your written authorization by signing this form.

I, \_\_\_\_\_, hereby authorize AOK to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that AOK will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation. I also understand that I may withhold my permission and that, in such a case, no investigation will be done, and my application for employment will not be processed further.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SSN \_\_\_\_\_

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