



Creating Opportunities for People with Developmental Disabilities

EMPLOYMENT APPLICATION

RETURN TO:

Ontario ARC
 Human Resources
 3071 County Complex Drive
 Canandaigua, New York 14424

APPLICANT:

- Please complete pages 1, 2, 3, and 4
- Type or print.
- If you need additional space, attach a supplemental sheet.

GENERAL

NAME	LAST	FIRST	MIDDLE	DATE OF APPLICATION	
PRESENT ADDRESS			STREET, CITY, STATE, ZIP CODE		PHONE (DAY)
SECONDARY ADDRESS			IF DIFFERENT FROM ABOVE		BIRTHDATE If under age 18
HAVE WORKED FOR ONTARIO ARC?			IF YES, INDICATE DATES OF EMPLOYMENT, DEPARTMENT, POSITION		
<input type="checkbox"/> YES <input type="checkbox"/> NO			_____		
DO YOU HAVE AUTHORIZATION TO WORK IN THE UNITED STATES?			IF NOT A NATURALIZED CITIZEN, PLEASE INDICATE TYPE OF WORK AUTHORIZATION		
<input type="checkbox"/> YES <input type="checkbox"/> NO			_____		
HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENSE OTHER THAN MINOR TRAFFIC VIOLATIONS?*			IF YES, PLEASE EXPLAIN		
<input type="checkbox"/> YES <input type="checkbox"/> NO			_____		
			<ul style="list-style-type: none"> • CONVICTION WILL NOT AUTOMATICALLY DISQUALIFY FOR EMPLOYMENT 		
ARE YOU CURRENTLY LISTED AS AN INELIGIBLE PERSON OR ENTITY ON ANY GOVERNMENT EXCLUDED PARTIES LIST (OFFICE OF INSPECTOR GENERAL, GENERAL SERVICES ADMINISTRATION, ETC.)?			IF YES, PLEASE EXPLAIN		
<input type="checkbox"/> YES <input type="checkbox"/> NO			_____		

POSITION

TYPE OF POSITION DESIRED _____ SALARY EXPECTED \$ _____

DATE AVAILABLE _____ ARE YOU SEEKING: FULLTIME PERMANENT EMPLOYMENT OTHER

IF OTHER, SPECIFY ANTICIPATED PERIOD OF WORK, AND/OR NUMBER OF HOURS PER DAY

WILL YOU WORK IRREGULAR HOURS? YES NO

WILL YOU WORK WEEKENDS? YES NO

PREFERRED HOURS _____

SOURCE OF REFERRAL _____ (i.e. SELF, NEWSPAPER, SCHOOL, STATE EMPLOYMENT, OFFICE, COMMUNITY AGENCY, OTHER, EMPLOYEE REFERRAL – IF SO, WHO?)

EMPLOYMENT RECORD List most recent employment first. Include periods of unemployment.

EMPLOYER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

INITIAL POSITION TITLE _____ START DATE _____ STARTING SALARY _____

FINAL POSITION TITLE _____ END DATE _____ FINAL SALARY _____

LAST SUPERVISOR'S NAME _____ PHONE _____

MAY WE CONTACT THIS EMPLOYER? YES NO

EMPLOYER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

INITIAL POSITION TITLE _____ START DATE _____ STARTING SALARY _____

FINAL POSITION TITLE _____ END DATE _____ FINAL SALARY _____

LAST SUPERVISOR'S NAME _____ PHONE _____

MAY WE CONTACT THIS EMPLOYER? YES NO

EMPLOYER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

INITIAL POSITION TITLE _____ START DATE _____ STARTING SALARY _____

FINAL POSITION TITLE _____ END DATE _____ FINAL SALARY _____

LAST SUPERVISOR'S NAME _____ PHONE _____

MAY WE CONTACT THIS EMPLOYER? YES NO

EMPLOYER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

INITIAL POSITION TITLE _____ START DATE _____ STARTING SALARY _____

FINAL POSITION TITLE _____ END DATE _____ FINAL SALARY _____

LAST SUPERVISOR'S NAME _____ PHONE _____

MAY WE CONTACT THIS EMPLOYER? YES NO

EMPLOYER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

INITIAL POSITION TITLE _____ START DATE _____ STARTING SALARY _____

FINAL POSITION TITLE _____ END DATE _____ FINAL SALARY _____

LAST SUPERVISOR'S NAME _____ PHONE _____

MAY WE CONTACT THIS EMPLOYER? YES NO

EMPLOYER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

INITIAL POSITION TITLE _____ START DATE _____ STARTING SALARY _____

FINAL POSITION TITLE _____ END DATE _____ FINAL SALARY _____

LAST SUPERVISOR'S NAME _____ PHONE _____

MAY WE CONTACT THIS EMPLOYER? YES NO

EDUCATION AND TRAINING

HIGH SCHOOL _____ CITY, STATE _____ TYPE OF DEGREE OR DIPLOMA _____ MAJOR SUBJECT _____
TECHNICAL SCHOOL, COLLEGE OR UNIVERSITY _____ CITY, STATE _____ TYPE OF DEGREE OR DIPLOMA _____ MAJOR SUBJECT _____
TECHNICAL SCHOOL, COLLEGE OR UNIVERSITY _____ CITY, STATE _____ TYPE OF DEGREE OR DIPLOMA _____ MAJOR SUBJECT _____
PROFESSIONAL ORGANIZATIONS, ASSOCIATIONS, HONORS, CERTIFICATION, PROFESSIONAL LICENSES AND PUBLICATIONS YOU CONSIDER SIGNIFICANT. PLEASE INDICATE THE PROFESSIONAL LICENSE NUMBER AND STATE OF ISSUANCE:
IF APPLICABLE, COMPUTER BACKGROUND
SYSTEMS USED _____ SOFTWARE KNOWLEDGE _____ KEYBOARD SPEED _____ WPM
OTHER SKILLS, TRAINING AND HOBBIES, OR VOLUNTEER EXPERIENCE THAT MIGHT BE RELEVANT TO EMPLOYMENT AT ONTARIO ARC: _____

REFERENCES

LIST THREE PERSONS (OTHER THAN RELATIVES OR PERSONAL FRIENDS) WHO HAVE KNOWLEDGE OF YOUR WORK EXPERIENCE AND/OR EDUCATION

NAME	MAILING ADDRESS	PHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____

ONTARIO ARC DOES NOT DISCRIMINATE BECAUSE OF AGE, SEX, RACE, RELIGION, NATIONAL ORIGIN, OR DISABILITY. MEMBER OF NYARC INC.

I hereby authorize investigation of all statements, and understand that misrepresentation or omission of facts called for in this form is cause for termination of employment without notice. I also agree: (1) to PPD Tuberculosis testing, employment being contingent on a satisfactory reading, thereof; (2) to such examination by an ARC designated physician as may be required, employment being contingent on the satisfactory passing, thereof; (3) to Criminal Background Checks as required by the Office of Mental Retardation and/or the Office of Mental Health, employment being contingent on their approval; and (4) if employed, to abide by all regulations and policies of ARC.

Date _____ Signature _____

Application Addendum

Ontario ARC
3071 County Complex Drive
Canandaigua, New York 14424

FOR DRIVING POSTIONS ONLY

Have you been convicted of a moving violation within the past (3) years? _____ If yes, please give details:

Have you ever had a license suspension, revocation, DWI conviction or any traffic occurrence involving harm to anyone or property? _____ If yes, please give details:

Do you have a conviction or prior employment history involving child or individual abuse, neglect or mistreatment? _____ If yes, please give details:

NOTE: Effective January 1, 1996, Ontario ARC mandates drug and alcohol testing for those drivers of commercial motor vehicles who fulfill safety sensitive functions, drive motor vehicles with a gross weight of 26,000 pounds or more, or who operate a vehicle that is designed to transport 16 or more passengers including the driver, prior to employment.

Signature

Date



CREATING OPPORTUNITIES FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

3071 County Complex Drive
Canandaigua, NY 14424
P. 585.394.7500
F. 585.394.1987
www.ontarioarc.org

A member of NYSARC, Inc.
A United Way Agency

IMPORTANT NOTICE TO ALL APPLICANTS

Any person hired into a position that has substantial unsupervised contact with the people we serve after April 1, 2005 will be required to undergo a Criminal History Record Check through the Office of Mental Retardation and Developmental Disabilities (OMRDD) per Chapter 575 of the Laws of 2004. In addition, Abbey Industries' programs and Transportation Services personnel will also be required to have a Criminal History Record Check through the Office of Mental Health (OMH). Effective March 12, 2007, fingerprints will also be checked through the Federal Bureau of Investigation (FBI).

All persons having substantial unsupervised contact with the people we serve hired by Ontario ARC after April 1, 2005 will be initially hired as provisional employees. During the provisional employment period, such employees may not work unsupervised with persons receiving services, nor can they work any overnight shift in a residential setting. In addition, provisional employees will be classed as non-benefit eligible until clearance is received. Once a person has obtained clearance, benefit eligibility will be instated for persons hired at 20+ hours per week retroactive to the starting date or the date of benefit eligibility, whichever is later.

In addition, candidates asked to interview will be required to disclose information related to pending criminal charges that would prohibit clearance through the Criminal History Record, as authorized by the Office of Mental Retardation and Developmental Disabilities (OMRDD) and the Office of Mental Health (OMH).

When a provisional employee is cleared for employment by OMRDD/OMH, the employment status will be changed from "provisional" to "regular." In the event the Criminal History Record Check is not cleared by OMRDD/OMH, employment will be immediately terminated.

Candidates for positions with substantial unsupervised contact with the people we serve who refuse to undergo a Criminal History Record Check cannot be considered for hire.

ONTARIO ARC TOBACCO FREE ENVIRONMENT

1. This policy applies to all Ontario ARC employees, participants, visitors, volunteers, vendors, and contractors, with the exception of Ontario ARC participants who have resided in an Ontario ARC home prior to April 1, 2010. Those persons will have designated outside smoking areas assigned, as no smoking will be permitted in Ontario ARC residential homes by any person.
2. As of April 1, 2010, tobacco use will not be permitted for employees, participants, visitors, volunteers, vendors, and contractors on any Ontario ARC property. This includes all buildings, entranceways, sidewalks, driveways, green spaces, parking lots and vestibules. Tobacco use will also not be permitted in any vehicle owned or leased by Ontario ARC, or in any vehicle parked on Ontario ARC property.
3. Tobacco use will not be permitted by staff when accompanying participants in the community during hours of work.
4. Tobacco products include, but are not limited to cigarettes, cigars, pipes, snuff and chewing tobacco.
5. Employees will receive a verbal reminder for their first violation, the purpose of which is to provide education and encouragement towards the goal of tobacco cessation. Employees who continue to smoke or use tobacco products at any Ontario ARC site are in violation of this policy and subject to supervisory intervention. Corrective action for violations of the Tobacco Free Environment Policy will be handled according to the agency policies on staff discipline.
6. All employees are encouraged and expected to be respectful and refrain from using tobacco products on the property of nearby businesses and residences. Loitering around non agency property and discarding tobacco products at these locations is prohibited.
7. Employees must comply with each work site's policy pertaining to leaving the work location during hours of work, during break or mealtimes.
8. All employees are required to observe and promote compliance with the Tobacco Free Environment Policy. If an employee witnesses any person who is violating this policy, he or she should inform the person of the Tobacco Free Environment policy and courteously ask him/her to dispose of or extinguish the tobacco product. Employees are encouraged to make a confidential report to their supervisor, manager, or Human Resources staff person when they observe another employee violating this policy.
9. Violations of this policy by vendors, agency/contract employees, visitors and volunteers, may result in restrictions or cancellation of their right to be present at sites.