

Adams County Board of DD

Board Office 482 Rice Dr., P.O. Box 157 West Union, OH 45693

937-544-2574 FAX 937-544-2223

Venture Productions, Inc. (Adult Services) 11516 St. Rt. 41, West Union, Ohio

937-544-2823 FAX 937-5447213

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer. Any information solicited by this application is not to be construed as a solicitation of information to render a decision based upon race, color, religion, age, sex, national origin or ancestry of any person, but is only to be used in determining the applicant's ability to meet the job criteria and perform the job satisfactorily.

Instructions:

- 1. It is important to answer all questions fully and accurately.
2. If an item does not apply to you, please write in the letter N/A for "not applicable."
3. Applications will remain on file for one year. Applicants will need to reapply after August 1 of each year.



1. DATE \_\_\_\_\_ 2. SOCIAL SECURITY NUMBER \_\_\_\_\_

3. NAME (last) \_\_\_\_\_ (first) \_\_\_\_\_ (middle) \_\_\_\_\_

4. PERMANENT ADDRESS: \_\_\_\_\_ TEMPORARY ADDRESS (until date \_\_\_\_\_)

\_\_\_\_\_  
\_\_\_\_\_

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

5. DATE AVAILABLE FOR EMPLOYMENT \_\_\_\_\_

6. ARE YOU AN AMERICAN CITIZEN? YES ( ) NO ( )

7. PRESENTLY A MEMBER OF THE NATIONAL GUARD OF RESERVE? YES ( ) NO ( )

Date obligation ends \_\_\_\_\_

8. MILITARY SERVICE \_\_\_\_\_ DISCHARGE DATE \_\_\_\_\_

9. ARE YOU 18 YEARS OF AGE OR OLDER? YES ( ) NO ( )

TYPE OF CLASSIFIED EMPLOYMENT DESIRED:

\_\_\_\_\_  
Secretary (WPM \_\_\_\_\_) \_\_\_\_\_ Cook \_\_\_\_\_ Janitorial

\_\_\_\_\_  
Educational Aide \_\_\_\_\_ Bus Driver

\_\_\_\_\_  
Workshop Specialist Do you have a valid driver's license? \_\_\_\_\_

Do you have a CDL passenger license? \_\_\_\_\_

TYPE OF CERTIFIED EMPLOYMENT DESIRED (REQUIRES A DEGREE)

\_\_\_\_\_  
Service and Support Administrator \_\_\_\_\_ Fiscal Operations

10. If a full-time position is not available in any of the above classified areas, are you interested in being a Substitute? YES ( ) NO ( )

(Applicants who are called for substitute work and who regularly fail to respond will be removed from the substitute list.)

11. Do you have more than 4 points on your driver's license? \_\_\_\_\_

12. Please state the name and relationship of any relatives in our employ. \_\_\_\_\_

13. Do you require any reasonable accommodations to perform the job? \_\_\_\_\_

14. REFERENCES: Please list the name, position, and phone number of three individuals by whom you would like a reference given. These should not be relatives or neighbors, but professional members of the community.

A. \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

B. \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

C. \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

15. EDUCATION:

High School _____ Location _____ Please attach copy of diploma.
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School or College	Location	Date attended	Degree and date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please attach original transcripts.

16. Special training, knowledge, certificates, permits, etc:

CPR current _____	Microsoft Excel _____	Microsoft Word _____
First Aid current _____	Computer troubleshooting _____	
Behavior Support _____	Other _____	

17. Any other information you may consider pertinent to your application. \_\_\_\_\_

\_\_\_\_\_

**CRIMINAL BACKGROUND CHECK**

\*Pursuant to Ohio Administrative Code Section 5123:2-2-02, the Adams County Board of Developmental Disabilities is required to conduct background investigations for purposes of employment. Please note that per 5123:2-2-02, there are five tiers of disqualifying offenses with corresponding time periods that preclude an applicant from being employed with this agency. Therefore, all applicants under final consideration will be required to submit to a background check through the Bureau of Criminal Identification and

Investigation. For more information, please review 5123:2-2-02. Your signature below verifies only that you understand our requirement to conduct background checks following job offers. Your signature also verifies that you understand that all prospective employees must pass a drug test prior to being hired. In addition, bus drivers are subject to a criminal background check under Ohio Revised Code 3319.39.

**PLEASE READ CAREFULLY BEFORE SIGNING:**

The information as submitted on this application is accurate to the best of my knowledge. I understand that falsification of any information submitted on this application shall be cause for dismissal from service.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_