



THE LILY CENTER

Employment Application

Complete in black ink or type. Fill out the application form completely. If questions do not apply to you, enter "NA". The Lily Center LLC is an equal opportunity employer and does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or the provision of services. Please attach resume to your completed application and email to careers@thelilycenter.com

I. APPLICANT INFORMATION

Last Name:

First:

Middle:

Street Address:

City:

State:

Zip:

Home Phone:

Cell:

Email:

Social Security
Number:

Date:

Please Answer YES or NO for the following questions:

Are you at least 18 years of age? YES NO

Are you willing to travel? YES NO

Have you ever been convicted of a felony or subjected to deferred adjudication on a felony charge? YES NO

If you answered yes to the question above, please explain in detail on a separate page, giving dates and nature of the offense. YES NO

Have you ever been convicted of a crime involving sexual abuse or molestation of a child? YES NO

If your answer is yes to the question above, please explain in detail on a separate page, giving dates and nature of the offense. YES NO

If hired, are you willing to submit to and pass a controlled substance test? YES NO

Are you a citizen of the United States? YES NO

Are you authorized to work in the United States? YES NO

Have you ever worked for or have any immediate family members ever worked for TLC? YES NO

II. POSITION INFORMATION

What position are you applying for?

How did you hear about this position?

Have you ever worked for TLC?

Do you know anyone that is currently or has worked for TLC in the past?

YES NO

If so, who?

How many hours do you wish to work?

Hours per week

What date are you available to start?

Please indicate your available schedule below:

MONDAYS

TUESDAYS

WEDNESDAYS

THURSDAYS

FRIDAYS

SATURDAYS

SUNDAYS

Special Skills/Training/Qualifications: Please list any job related training or skills that you possess and all technology that you can use including computer programs:

III. EDUCATION

Type of School	Name	Location	Dates Attended	Date Graduated	Expected Graduation Date	Degree Held
High School						
College						
Graduate School						
Technical/ Vocational Schools						
Other						

If license or certificate is required for desired position, please complete information below:

License/Certification	Date Issued	Date Expires	Issued by/location of issuing authority or state	License Number

IV. REFERENCES

Please list at least three professional references (one academic reference can be substituted for one professional reference). You consent by completing this form that TLC has permission to contact the references listed below.

V. EMPLOYMENT HISTORY

Position Title: _____

Employer: _____

Mailing Address: _____

City _____

State: _____

Zip: _____

Employer's Telephone #: _____

Immediate Supervisor Name

Title:

Supervisor's Phone #:

Starting Date:			Leaving Date:			Reason for Leaving:
Month	Day	Year	Month	Day	Year	

Summary of experience in this position including special skills and training you have used in the performance of this job:

Position Title: _____

Employer: _____

Mailing Address: _____

City _____

State: _____

Zip: _____

Employer's Telephone #: _____

Immediate Supervisor Name

Title:

Supervisor's Phone #:

Starting Date:			Leaving Date:			Reason for Leaving:
Month	Day	Year	Month	Day	Year	

Summary of experience in this position including special skills and training you have used in the performance of this job:

Position Title:	_____	Immediate Supervisor Name
Employer:	_____	_____
Mailing Address:	_____	Title:
City	_____	_____
State:	_____	Supervisor's Phone #:
Zip:	_____	_____
Employer's Telephone #:	_____	

Starting Date:			Leaving Date:			Reason for Leaving:
Month	Day	Year	Month	Day	Year	

Summary of experience in this position including special skills and training you have used in the performance of this job:



Position Title:	_____	Immediate Supervisor Name
Employer:	_____	_____
Mailing Address:	_____	Title:
City	_____	_____
State:	_____	Supervisor's Phone #:
Zip:	_____	_____
Employer's Telephone #:	_____	

Starting Date:			Leaving Date:			Reason for Leaving:
Month	Day	Year	Month	Day	Year	

Summary of experience in this position including special skills and training you have used in the performance of this job:

VI. ACKNOWLEDGEMENTS

Can you perform the major job functions as listed in the job description with or without reasonable accommodations? YES NO

Accommodations needed? YES NO

If Yes, please describe:

I understand that The Lily Center LLC and its affiliates may now have, or may establish, a drug-free, alcohol-free, and tobacco-free workplace to include a drug and alcohol testing program consistent with applicable federal, state, and local laws. I agree to uphold a drug-free, alcohol-free, and tobacco-free work environment that also prohibits weapons or firearms anywhere on the premises. I understand that this applies both on TLC property and when off property for field trips and home/community visits with clients. I understand that if a pre-employment (post-offer) or a random drug and alcohol test is positive, the employment offer may be withdrawn or employment may be terminated. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local laws. I understand and consent to pre-employment and random drug tests as a condition of employment and further agree to undergo alcohol and drug testing consistent with The Lily Center LLC and its affiliates policies and procedures.

I understand and agree that The Lily Center LLC and its affiliates, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local laws, I may be required to sign confidentiality, restrictive covenant, non-compete agreements and/or conflict of interest statements.

I certify that all the information on this application and any supporting documents presented with this application is accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate termination.

The Lily Center LLC and its affiliates is an at-will employer as allowed by applicable state law. This means that regardless of any provision in this application, if hired, the company or I may terminate the employment relationship at any time, for any reason, with or without cause or notice. This application or any document or statement, written or oral, shall limit the right to terminate employment at-will. No officer, employee or representative of the company is authorized to enter into an agreement express or implied, with me or any applicant for employment for a specified period of time unless such agreement is in written contract signed by the Executive Director of the company.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE LILY CENTER LLC AND ITS AFFILIATES. I FURTHER UNDERSTAND THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, WITH THE EXCEPTION OF ITS EMPLOYMENT AT-WILL POLICY.

I authorize The Lily Center LLC and its affiliates to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking and to the extent permitted by federal, state, and local laws. I agree to comply with any and all required pre and post employment screenings to include background check, drug screen, and driving history investigation.

I authorize and consent to, without reservation, any party or agency contracted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to The Lily Center LLC and its affiliates to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability The Lily Center LLC and its affiliates for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by The Lily Center LLC and its affiliates, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States. I also understand The Lily Center LLC and its affiliates employs only individuals who are legally eligible to work in the United States.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

Applicant Printed Name _____

Applicant Signature _____ Date: _____