

GREYSTONE PROGRAMS, INC.

36 VIOLET AVENUE, POUGHKEEPSIE, NY 12601

Tel: (845) 452-5772 Fax: (845) 485-9990

www.greystoneprograms.org

Committed to providing exceptional services and life enriching opportunities to children, adults and families living

APPLICATION FOR EMPLOYMENT

NAME _____ POSITION APPLYING FOR _____
FOR _____

MAILING ADDRESS _____
Number Street Apt. No.

City/Town/Village State Zip Code

TELEPHONE NO. () _____ CELL PHONE NO. () _____

LEGAL ADDRESS (If different from above)

Number Street Apt. No.

City/Town/Village State Zip Code

Preferred Shift: 1st _____ 2nd _____ 3rd _____ Full time Part-time Per Diem (on call)
Sample hrs: 7 am-3 pm 3 pm-11 pm 11 pm-7 am

Which days of the week are you available to work? (Most positions require some availability on weekends)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Which locations are you willing to commute to? Poughkeepsie Administrative Facility

Wappingers Falls Hyde Park Staatsburg Salt Point Poughquag Pawling
 Stanfordville Warwick Sugar Loaf Monroe Other locations

Are you eligible to work in the United States? _____ Yes _____ No

Are you over 18 years of age? _____ Yes _____ No

Have you ever applied to or worked for Greystone Programs before? _____ Yes _____ No

If yes, when and where? _____

Have you ever been convicted of any felony, misdemeanor, or violation of law? (please explain below) _____ Yes _____ No

Do you currently have any pending criminal charge against you in any jurisdiction? (please explain) _____ Yes _____ No

Offense	Town/City/State	Month/Year	Sentence/Outcome:

Please note: Failure to disclose criminal history may result in denial of application.

Have you ever been fired or have you resigned from a job as a result of substantiated abuse and/or neglect charges? _____ Yes _____ No

If yes, please give details: _____

LIST ALL JOBS HELD IN LAST 8 YEARS BEGINNING WITH CURRENT/MOST RECENT POSITION

Dates of Employment: From _____ (mm/yy) To _____ (mm/yy) Salary \$ _____ per _____

Employer Name _____ Job Title _____

Address _____

Street City State Zip

Telephone No. (____) _____ Supervisor's Name _____

Duties: _____

Reason(s) for leaving: _____

If currently employed, may we contact? _____

Dates of Employment: From _____ (mm/yy) To _____ (mm/yy) Salary \$ _____ per _____

Employer Name _____ Job Title _____

Address _____

Street City State Zip

Telephone No. (____) _____ Supervisor's Name _____

Duties: _____

Reason(s) for leaving: _____

Dates of Employment: From _____ (mm/yy) To _____ (mm/yy) Salary \$ _____ per _____

Employer Name _____ Job Title _____

Address _____

Street City State Zip

Telephone No. (____) _____ Supervisor's Name _____

Duties: _____

Reason(s) for leaving: _____

Additional employment experience:

From: _____ (mm/yy) To: _____ (mm/yy) Employer: _____

From: _____ (mm/yy) To: _____ (mm/yy) Employer: _____

APPLICANT INFORMATION

Thank you for your interest in employment with Greystone Programs, Inc. As part of our selection process, we perform a thorough background screening on all potential hires. This screening will include obtaining information from the following sources:

- Prior Employment References (*including current/most recent job*)
- Personal References (*at Agency's discretion*)
- Criminal History Record Check
- State Central Child Abuse Register Check (*if working with children*)
- Verification of Highest Level of Education
- Verification of Driver's License and Review of Motor Vehicle Driving Record*

*Nearly all positions in our agency require you to drive an agency vehicle at some point during your employment. Your signature below authorizes us to obtain your driving record from the Dept. of Motor Vehicles to verify that you have a valid driver's license and that your past driving record is acceptable. Please answer the following questions about your driving history:

- | | YES | NO |
|--|-----|-----|
| 1. Are you currently licensed to operate a motor vehicle in New York? | [] | [] |
| 2. Have you been convicted of <u>any</u> moving violation in the last three (3) years? | [] | [] |
| 3. Have you ever been convicted of a DWI, DUI, OUI or OWI? Year _____ | [] | [] |
| 4. Has your driver's license ever been suspended or revoked? Year _____ | [] | [] |
| 5. Have you ever been involved in an accident or occurrence involving harm to human beings or property while driving? Year _____ | [] | [] |

Please note that failure to disclose information regarding your driving history may be cause for immediate denial of your employment application. In addition, if your motor vehicle report indicates that you have had serious or excessive driving violations/convictions we may not be able to approve your application for employment.

Driver's License ID No. _____ State _____

I attest that the statements provided by me in this application for employment are true and correct. I understand that if hired, my driver's license will be monitored during my employment to ensure I remain an acceptable driver. If my license is suspended, revoked or I receive excessive or serious convictions I may be terminated due to my inability to perform the driving responsibilities of my position.

Applicant's Signature Date

Print name: _____

CRIMINAL BACKGROUND CHECK

As an applicant for employment who will have regular and substantial, unsupervised or unrestricted physical contact with Individuals receiving OMRDD services, you are advised that we are required to conduct a check of your criminal history record information and will review the results of such check. You have the right to obtain, review and seek correction of your criminal history record information pursuant to regulations and procedures established by the Department of Criminal Justice Service.

TB TESTING REQUIRED

All employees wishing to work for Greystone Programs, Inc. will be required to have a screening to determine if you have been exposed to tuberculosis. This screening is performed at our expense by a licensed nurse and will take place before or during your orientation period. If you prefer to have the screening done at your cost by your own physician, or if you have had this screening done within the past 12 months, please provide us with written results before beginning work for our Agency.

OVERTIME/CONTINUOUS COVERAGE

From time to time direct care professionals may be required to work extra hours in addition to their regular work day/week. This practice is known as providing continuous coverage. While every attempt will be made to find volunteers to work in situations of emergency absences, your ability to provide continuous coverage when called upon is required. If there is any reason you are unable to meet this requirement, you are obligated to advise us before accepting an offer of employment.

PHYSICAL REQUIREMENTS OF DIRECT CARE WORKERS

Employees providing significant direct care to Individuals with developmental disabilities may be required to perform tasks requiring specific physical ability, such as heavy lifting. Please ask to review the physical requirements of this position if contacted for an in-person interview.

ORIENTATION AND REQUIRED TRAINING

Applicants selected for employment with Greystone will be provided with an extensive orientation and training period shortly after hire. Training typically takes place at our Poughkeepsie facility during daytime hours and lasts 5 business days. For those hired to work in our Orange County programs, orientation typically takes place in Sugar Loaf during evening hours. If there is any reason you are unable to attend this type of training, please advise us prior to accepting any offer of employment.

If you have questions regarding employment with Greystone Programs, please discuss with a Human Resources Representative.

Applicant's Signature

Date

Print name: _____

Thank you for your interest in Greystone Programs!