



2701 N A Street • Midland, TX 79705 • phone 432.695.9901 • fax 432.695.9909 • www.spectrumofsolutions.org

## Employment Application

*Spectrum of Solutions does not discriminate in employment based on race, color, religion, sex (including pregnancy and gender identity), national origin, political affiliation, sexual orientation, marital status, disability, genetic information, age, membership in an employee organization, retaliation, parental status, military service, or other non-merit factors.*

### PERSONAL INFORMATION (Please Print)

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Name: \_\_\_\_\_

Phone No. \_\_\_\_\_

Address: \_\_\_\_\_

Position applying for: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Date available for work: \_\_\_\_\_

### BASIC QUALIFICATIONS FOR EMPLOYMENT (Circle Answer)

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YES NO Are you at least 21 years old? Not necessary if you are applying for a position at the Children's Therapy Center.

YES NO Are you legally eligible for employment in this United States?  
*(Employment is contingent upon proof of eligibility for employment in the US.)*

YES NO Do you have a High School Diploma or GED?

YES NO Do you have a valid Texas Driver's license?  
*(Employment is contingent upon proof of valid Texas Driver's license.)*

YES NO Have you had any moving violations on your motor vehicle record in the past three (3) years?  
*(A motor vehicle record will be obtained to verify acceptable driving record.)*

YES NO Can you safely lift 50 pounds? If not, why? \_\_\_\_\_

YES NO Have you ever been employed with Spectrum of Solutions? If Yes, please give dates: \_\_\_\_\_

YES NO Have you ever applied for employment with Spectrum of Solutions? If Yes, please give dates: \_\_\_\_\_

YES NO Do you have a good employment history?  
*(Previous employers WILL be contacted and references obtained.)*

YES NO Can you provide three personal letters of recommendation from persons not related to you?  
*(Required when hired.)*

YES NO Are you CPR/First Aid Certified?

YES NO A clear drug screen is required to be employed at Spectrum of Solutions. Will you submit to a drug screen?  
*(Employment is contingent upon a negative drug screen.)*

YES NO Have you been convicted of a criminal offense? If YES, Please explain conviction(s) and list dates.  
*(Texas law prohibits Spectrum of Solutions from hiring individuals convicted of certain crimes.)*

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YES NO Do you speak, write or understand any foreign languages? If yes, describe which languages(s) and how fluent of a speaker do you consider yourself to be? \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

List any relatives currently working for Spectrum of Solutions: \_\_\_\_\_

Employment Desired: Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_

Preferred days:

Monday \_\_\_\_\_ Thursday \_\_\_\_\_ Saturday \_\_\_\_\_

Tuesday \_\_\_\_\_ Friday \_\_\_\_\_ Sunday \_\_\_\_\_

Wednesday \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_

Write a brief paragraph about yourself, why you want this job and your qualifications for the job: \_\_\_\_\_

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

## EMPLOYMENT HISTORY

Are you currently employed?  Y or  N

If so, may we contact your current employer?  Y or  N

**Please complete the information requested below on your last three employers or attach a resume. Please start with your most recent employer. If you have gaps in employment, please explain in comment section.**

Employer	Telephone ( )	DATES EMPLOYED FROM TO		Summarize the nature of the work performed and job responsibilities.
Address				
Job Title				

Immediate Supervisor & Title	Reason for Leaving
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Comments: \_\_\_\_\_

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

**Please list any relevant trainings, certifications, or licensures that will be benefit to this position.**


**PERSONAL HISTORY (Please Print)**

**Please list where you have lived for the last five years (Address, City, State)**

HOME ADDRESS (IF KNOWN)	CITY/STATE	HOW LONG DID YOU LIVE HERE?

**EDUCATIONAL BACKGROUND**

HIGH SCHOOL/COLLEGE/BUSINESS OR TRADE/OTHER	CITY/STATE	GRADE COMPLETED/DEGREE OBTAINED

I acknowledge and agree that completion of this Application shall not constitute an employment contract or guarantee employment with Spectrum of Solutions.

**Print name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

By signing this document, MARC INC dba Spectrum of Solutions discloses to you that a consumer report, including an investigative consumer report containing the information as to your character, general reputation, personal characteristics, and mode of living, may be obtained for your employment purposes as part of the pre-employment background investigation and at any time during your employment. Should an investigative consumer report be requested, you will have the right to request a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act. Please sign below to acknowledge the receipt of this disclosure.

**Print name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I understand and agree that any misrepresentation or false information given in this application or resume submitted to Spectrum of Solutions will be grounds for ineligibility of employment and/or termination of employment.

**Print name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please sign and date signifying the completion of the application.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_





