



Services for women, children and families

318 5th Street S.E., Cedar Rapids, IA 52401 (319) 365-1458 Phone (319) 365-2263 Fax
www.waypointservices.org

APPLICATION FOR EMPLOYMENT

PLEASE PRINT CLEARLY IN INK OR TYPE

Name _____ Social Security Number _____
Last First Middle

Home Address _____
Street City State Zip Code

Home Telephone Number _____ Daytime Telephone Number _____

Temporary Address _____

Can you provide proof, if hired, that you are eligible to work in the United States? ☐ Yes ☐ No
Are you over the age of 18? ☐ Yes ☐ No If no, are you able to furnish a work permit? ☐ Yes ☐ No

Have you ever been employed by Waypoint, formerly the YWCA? If yes, please give dates of employment, position(s) held, and state your name while employed, if different from present name:

How did you hear about this position? _____

Names of relatives or friends employed by Waypoint: _____

POSITION CATEGORY

Please check the areas you are qualified in and would consider:

Child Care: ☐ Uptown Kids (Infant - 5 yrs.) ☐ RiverRidge Kids (Infant - 5 yrs.) ☐ ParkRidge Kids (Infant - 5 yrs.)
☐ School Age Kids (5- 12 yrs.) ☐ Summer Adventure Day Camp (5-12yrs.)
Services: ☐ Madge Phillips Center for the homeless ☐ Domestic Violence/Sexual Assault Program
Other: ☐ Food Service ☐ Maintenance ☐ Administration ☐ Clerical/Receptionist
☐ Other (please specify) _____

Specific Position Applying For: _____

Wage/Salary Expected: _____ If selected, when can you start work? _____

Are you seeking: ☐ Full-Time Work ☐ Part-Time Work ☐ Would Consider Either
Do you have reliable transportation? ☐ Yes ☐ No ☐ Public Transportation ☐ Own Vehicle ☐ Other _____

Are you willing and able to travel to off-site locations? ☐ Yes ☐ No If no, explain: _____

Are you willing to work overtime, if required? ☐ Yes ☐ No If no, explain: _____

PERSONAL RECORD

Have you ever been convicted of a crime, other than a minor traffic offense? ☐ Yes ☐ No

(Conviction of a crime will not necessarily disqualify you from employment with us.)

If yes, describe: _____

PERSONAL DRIVING RECORD

Do not complete this section unless you are applying for a position which would require you to operate a Waypoint vehicle.

Do you have a valid Driver's License? ☐ Yes ☐ No State _____ License Number _____

Do you have a Chauffeur's License? ☐ Yes ☐ No State _____ License Number _____

Within the past two years, have you had a vehicle accident of any type? ☐ Yes ☐ No If yes, how many? _____

Have you been convicted of reckless or drunken driving? ☐ Yes ☐ No If yes, when? _____

Have you been cited for moving violation(s)? ☐ Yes ☐ No If yes, when? _____

EDUCATION AND TRAINING

Please circle highest year of education completed:

ELEMENTARY/MIDDLE:

1 2 3 4 5 6 7 8

HIGH SCHOOL:

9 10 11 12

COLLEGE:

13 14 15 16 17 18 19 20

EDUCATION*	SCHOOL NAME COMPLETE ADDRESS	COURSE OF STUDY OR MAJOR	TYPE OF DEGREE GRANTED/GPA
High School or GED			
Trade School or Business College			
College			
Graduate School			
Other			

Subject(s) of greatest interest to you: _____

Subject(s) of least interest to you: _____

List other education or training that is applicable to the position for which you are applying: _____

*Official transcripts and/or degree may be requested depending on the requirements of the position for which you are applying.

MILITARY SERVICE

Present Military Obligation (Military Service, Reserves or National Guard): _____

EMPLOYMENT HISTORY

Most recent or current employer				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address		Street	City	State	Zip Code
Type of business			Employed from (month-day-year) to (month-day-year)		
Last position held			Wage/Salary \$ to \$		
List job responsibilities					
Supervisor and Department			Telephone number		
Reason for leaving					
Second most recent or current employer				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address		Street	City	State	Zip Code
Type of business			Employed from (month-day-year) to (month-day-year)		
Last position held			Wage/Salary \$ to \$		
List job responsibilities					
Supervisor and Department			Telephone number		
Reason for leaving					
Third most recent or current employer				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address		Street	City	State	Zip Code
Type of business			Employed from (month-day-year) to (month-day-year)		
Last position held			Wage/Salary \$ to \$		
List job responsibilities					
Supervisor and Department			Telephone number		
Reason for leaving					
Fourth most recent or current employer				May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address		Street	City	State	Zip Code
Type of business			Employed from (month-day-year) to (month-day-year)		
Last position held			Wage/Salary \$ to \$		
List job responsibilities					
Supervisor and Department			Telephone number		
Reason for leaving					

Please identify and explain any gaps in your continuous employment history during the last five years: _____

PERSONAL REFERENCES

Please furnish three references with complete addresses in all cases. **Do not** list former supervisors or persons residing at your current address.

Name _____ Street Address _____

City _____ State _____ Zip Code _____

Daytime Telephone Number _____ Home Number, if different _____

Relationship _____ Length of acquaintance _____

Name _____ Street Address _____

City _____ State _____ Zip Code _____

Daytime Telephone Number _____ Home Number, if different _____

Relationship _____ Length of acquaintance _____

Name _____ Street Address _____

City _____ State _____ Zip Code _____

Daytime Telephone Number _____ Home Number, if different _____

Relationship _____ Length of acquaintance _____

EMPLOYMENT POLICY

It is the policy of Waypoint to provide employment without regard to race, color, religion, national origin, sex, age, marital status, disability, sexual orientation, Vietnam era or disabled veteran status. All offers of employment are contingent on the applicant passing a physical examination, verification of information in this application and a negative report on the State of Iowa Criminal History Records Check.

PLEASE READ AND SIGN

I CERTIFY that the statements herein are correct and true to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be considered cause for dismissal. I agree to hold free from liability persons furnishing information regarding my character and qualifications for employment. I agree that Waypoint may also furnish like information upon request to any prospective employer, and I will not hold Waypoint liable. I agree that the confidential information obtained or released by Waypoint will not be released to me.

Additionally, I understand that nothing contained in this employment application, in the granting of an interview, an offer of employment, or hire is intended to create an employment contract with Waypoint. If an employment relationship is established, I understand that employment at Waypoint is *AT WILL EMPLOYMENT*; that is, the employee or Waypoint may terminate it at any time with or without cause.

Signature

Date

Please return form to: Waypoint, Human Resources, 318 5th Street SE, Cedar Rapids, IA 52401

Thank you for your interest in Waypoint employment opportunities!