

EMPLOYMENT APPLICATION

PLANNED PARENTHOOD WEST TEXAS, INC.

Position Applied For: _____ Date of Application: ____/____/____

Name: _____ Soc. Security: _____
Last First Middle

Address: _____
Street City State Zip

Telephone #: Day: _____ Home: _____ Cell: _____ Email: _____

Date first available for work: ____/____/____ Names of relatives / friends employed by us: _____

How did you become aware of the position you are applying for? _____

What other names have you worked under? _____

Are you legally eligible for employment in the U.S.A.? Yes No Valid Driver's License #: _____ State: ____

Type of employment desired: Full-time Part-time Temp PRN (on call) Salary Range Desired: _____ per: _____

Are you able to meet the attendance requirements of this position? Yes No

Have you been convicted of a felony or misdemeanor other than a minor traffic violation? Yes No If yes, please explain below:
(Conviction is not an automatic disqualification. All circumstances will be looked into when making a determination.) _____

Have you ever been discharged or asked to resign from a position? Yes No If yes, please explain: _____

WORK HISTORY: List every employer, assignment or volunteer activity, starting with the most recent. Attach an additional sheet of paper if more room is needed. Please include military experience.

From: ____/____/____ To: ____/____/____ Employer: _____ Telephone: () _____

Your Job Title: _____ Address: _____ City: _____ State: _____

Rate of Pay: Start \$: _____ Final \$: _____ Immediate Supervisor and Title: _____

Reason for leaving: _____

Summarize the nature of work performed and job responsibilities: _____

From: ____/____/____ To: ____/____/____ Employer: _____ Telephone: () _____

Your Job Title: _____ Address: _____ City: _____ State: _____

Rate of Pay: Start \$: _____ Final \$: _____ Immediate Supervisor and Title: _____

Reason for leaving: _____

Summarize the nature of work performed and job responsibilities: _____

From: ____/____/____ To: ____/____/____ Employer: _____ Telephone: () _____

Your Job Title: _____ Address: _____ City: _____ State: _____

Rate of Pay: Start \$: _____ Final \$: _____ Immediate Supervisor and Title: _____

Reason for leaving: _____

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From: ____/____/____ To: ____/____/____ Employer: _____ Telephone: () _____

Your Job Title: _____ Address: _____ City: _____ State: _____

Rate of Pay: Start \$: _____ Final \$: _____ Immediate Supervisor and Title: _____

Reason for leaving: _____

Summarize the nature of work performed and job responsibilities: _____

| | |
|---|--------------------------|
| Professional License / Certification | |
| Are you Licensed or Certified Member of a profession or trade? <input type="checkbox"/> Yes <input type="checkbox"/> No | Type: _____ State: _____ |
| Issue No. _____ Issue Date: _____ | Expiration Date: _____ |

Professional Organizations to which you belong: _____

| Foreign Languages: | 1. | 2. | 3. | 4. |
|-----------------------------------|---|---|---|---|
| List Languages & check applicable | <input type="checkbox"/> Speak <input type="checkbox"/> Write <input type="checkbox"/> Read | <input type="checkbox"/> Speak <input type="checkbox"/> Write <input type="checkbox"/> Read | <input type="checkbox"/> Speak <input type="checkbox"/> Write <input type="checkbox"/> Read | <input type="checkbox"/> Speak <input type="checkbox"/> Write <input type="checkbox"/> Read |

Skills and Qualifications: *Summarize special skills and qualifications you would like to tell us more about.*

| Education: Name and Location of school: | | Years Completed | Graduated? Yes No | Course of Study / Degree |
|--|--|-----------------|----------------------|--------------------------|
| High School: | | | | |
| College: | | | | |
| College: | | | | |
| Other: | | | | |

| Business References (<i>do not list relatives</i>) | Position | Telephone | Years Known |
|--|----------|-----------|-------------|
| 1. | | () | |
| 2. | | () | |
| 3. | | () | |

PLEASE READ CAREFULLY

I certify that the information I have submitted is true, accurate and complete and in exchange for the consideration of my employment application by Planned Parenthood of West Texas, Inc. (herein after called "PPWT" or "the company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any arrangement of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other company practices, shall serve to create an actual or implied contract of employment. Nor shall it confer any right to remain an employee of PPWT or otherwise to change in any respect the employment-at-will relationship between it and the undersigned. Further, that relationship cannot be altered except by a written instrument signed by the CEO of PPWT. Both the undersigned and PPWT may end the employment relationship at any time, without specified notice or reason. If employed, I understand that PPWT may unilaterally change and/or revise their benefits, policies and procedures and such changes may include reduction or elimination of benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for within this application, resume and/or interview(s) is cause for rejection or for dismissal of employment if hired at anytime, regardless of time of discovery, without previous notice. I hereby give PPWT (along with any 3rd party requested by PPWT) permission to contact schools, all previous employers (unless otherwise requested) references, and any other parties. I agree to hold PPWT and all parties free and blameless of any liability for releasing truthful information that is within their knowledge or records.

I understand that in connection with the routine processing of my employment application, PPWT may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation and personal characteristics. Upon written request from me, PPWT will provide me with information concerning the nature and scope of any such report, as required by the Fair Credit Reporting Act. I further understand that employment with PPWT shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period (also known as "orientation period") or thereafter, my employment relationship with PPWT is terminable at will for any reason or no reason by either party.

Signature of Applicant: _____ **Date:** _____

PPWT is an Equal Employment Opportunity Employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with PPWT depends solely on your qualifications and the requirements of the job.



Planned Parenthood®

of West Texas

910-B South Grant

Odessa, Texas 79761

EEO DATA CARD

DISCLAIMER: The information requested is voluntary and will assist PPWT in evaluating its recruitment program. This information does not become a part of the hiring process, nor will the information be considered by those involved in the hiring process. This data is being collected under EEOC and HEW monitoring requirements.

NAME: _____ TODAY'S DATE _____

MAILING ADDRESS: _____
Street City State Zip

SOCIAL SECURITY NUMBER: _____ MALE FEMALE

Where did you learn about this job? _____ Position Applied For _____

CHECK ONE ONLY:

- White (but not of Hispanic origin)
- Black (But not of Hispanic origin)
- Hispanic: All persons of Mexican, Puerto Rican, Cuban, central or South American, or other Spanish Culture or origin, regardless of race.
- Asian or Pacific Islanders
- American Indian or Alaskan Native

| |
|------------------------------|
| AGE |
| 17 and under _____ |
| 18 - 39 _____ |
| 40 - 65 _____ |
| Are you handicapped? Y N |
| If so, please specify: _____ |
| _____ |
| _____ |



REFERENCE CHECK AUTHORIZATION

“We want you to know that reference checking is an important part of our hiring process. In addition to contacting the persons you furnished us as references, we may also contact other business associates, acquaintances and friends. We ask all references a series of questions about work experience, character, personal habits, educational background and personality. In some cases, we ask an outside firm to check references.”

“I voluntarily consent to allow Planned Parenthood of West Texas, Inc., or any of its officers, employees or agents to check my references by contacting any person whom they deem to be an appropriate reference. I understand that these questions may be about my personal or educational background, work experience, character and personality.”

Signature

Date



Planned Parenthood®
of West Texas, Inc.

EMPLOYMENT ESSAY QUESTIONS

NAME: _____

DATE: _____

1. How do you feel about the abortion issue?

2. How do you feel about teens accessing birth control?