



The Advocate Program Inc. is an Equal Opportunity Employer. We do not discriminate based on race, creed, color, sex, age, national origin, handicap or sexual orientation.

1150 NW 72nd Ave, Suite 200 Miami, FL 33126
(305) 704-0200 Fax (305) 704-0199

Date of Hire: _____

Rate of Pay: _____

Application For At - Will Employment

Personal Data

Name (last, first, middle) : _____ Date : _____

Address: _____

City: _____ State: _____ Zip Code : _____

Home Phone: () _____ Work Phone: () _____

Are you legally eligible for employment in the United States? Yes No

Maiden name or other name you may have used previously: _____

Position(s) applying for: _____

Referred By: _____

Education Record

High School: _____ Dates Attended: _____ to _____

Address (if not in South Florida): _____

Did you graduate? Yes No

College / University: _____

Major: _____ Degree: _____

Address: _____ Dates Attended: _____ to _____

College / University: _____

Major: _____ Degree: _____

Address: _____ Dates Attended: _____ to _____

Certifications/Licenses: _____

Specialized Training: _____

Membership in professional or Civic Organizations: _____

Military Service

Branch of service : _____ Dates of service: _____ to _____

Security Clearance: _____

Duties / Special Training: _____

Employment History

Begin with most recent employer. Attach additional sheet if needed.

Employer : _____ Dates of employment: _____ to _____

Address: _____

City: _____ State : _____ Zip Code : _____

Phone () _____ Beginning Salary _____ Ending Salary _____

Title: _____

Duties: _____

Supervisor's name: _____

Reason for leaving: _____

Employer : _____ Dates of employment: _____ to _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone () _____ Beginning Salary _____ Ending Salary _____

Title: _____

Duties: _____

Supervisor's name: _____

Reason for leaving : _____

Personal History

Advocate Program, Inc. is a Drug Free Workplace and background checks are performed. However, a prior criminal history does not disqualify you for employment. Have you ever been charged as an adult with a criminal traffic, misdemeanor, or felony offense? Due to the law enforcement nature of this program, please include anything that has been sealed and/or expunged.

Please be aware that even though you may have not been booked into a jail facility, if you were detained by security guard or a police agency and you were notified of a court appearance, that is an arrest and you were charged.

Yes No

Names of friends or relatives that are employed by this company: _____

Do you have any physical or mental disability that may limit your performance in the job you are applying for? If so, what can be done to accommodate your limitation?

Are you a U.S. citizen? Yes No If "No", describe status _____

Driver License Number: _____ State: _____

How long at present address? _____ Years How long at previous address? _____ Years

What was your previous address? _____

References

List two professional references who are familiar with the quality of your work, have worked directly with you, and have known you at least two years.

Reference 1) _____

Relationship: _____ Phone Number: _____

Address: _____ City/State/Zip _____

Reference 2) _____

Relationship: _____ Phone Number: _____

Address: _____ City/State/Zip _____

The information provided in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I authorize a full criminal history investigation prior to my employment.

Applicant's Signature: _____ Date: _____