

# Willows Way, Inc.

800 Friedens Rd., Ste. 100, St. Charles, MO 63303

Phone: 636-947-6591, Fax: 636-757-0512 Email: hr@willowsway.org



## APPLICATION FOR EMPLOYMENT

If at any time during the application or selection process, you believe you may require a special accommodation to perform the work for which you are applying, or assistance completing this application, please inform the Human Resources Department.

**Please note that we conduct Pre-Employment Drug Screenings and use E-verify to verify eligibility for employment.**

Name: \_\_\_\_\_ Date of application: \_\_\_\_\_  
(Last) (First) (MI)

Preferred Name: \_\_\_\_\_  
Personal Pronouns:  She/Her  He/Him  They/Them  Other (please specify) \_\_\_\_\_  Do not wish to share

Position(s) applying for:  
 Direct Support Professional (Residential)  Direct Support Professional (RISE Day Program)  
 Home Coordinator (Residential-experience required)  Realities Community Resource Coordinator (Some college/exp. req.)  
 Supervisor/Manager (Experience required)  Other: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_  
(Number/Street) (City) (State) (Zip Code)

Are you 18 years of age or older?  Yes  No Are you eligible to work in the United States?  Yes  No

How did you hear about this position?  From Current Employee Name: \_\_\_\_\_

Ad: \_\_\_\_\_  Referral: \_\_\_\_\_  Other: \_\_\_\_\_  
(Where?) (First/Last Name) (Please identify)

What type of employment are you seeking?  Full-time  Part-time; Number of hours desired per week: \_\_\_\_\_

Check all geographic work locations where you are willing to travel:  
 Anywhere in North St. Louis County  Anywhere in South St. Louis County  
 Anywhere in West St. Louis County  Anywhere in St. Charles County

- Have you ever been employed by Willows Way, Inc.?  Yes  No If Yes, when? \_\_\_\_\_
- Do you have a current valid driver's license?  Yes  No
- Do you have current active vehicle insurance?  Yes  No
- Do you have reliable transportation including working seatbelts, working air conditioner/heat, vehicle in overall good/clean/safe condition and available to you for every shift you may work?  Yes  No
- Depending on your experience & prior training, you will be required to attend 50+ hours of online training within the first 3-5 weeks of employment and 38 in person classroom hours, at varying times. Do you agree to this?  Yes  No

- If hired, when would you be available to begin working for Willows Way? \_\_\_\_/\_\_\_\_/\_\_\_\_
- Are you related to any Willows Way clients or employees? Yes No If yes, who? \_\_\_\_\_

**Work History (Begin with *most recent* employer)**

Employer: _____	City/State: _____
From (Mo/Yr): _____ to _____	Job title: _____
Employment type: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Responsibilities:	
Reason for leaving: _____	
May Willows Way, Inc. contact this employer for verification of information provided on this form?	
Yes <input type="checkbox"/> No <input type="checkbox"/> Explanation, if applicable: _____	

Employer: _____	City/State: _____
From (Mo/Yr): _____ to _____	Job title: _____
Employment type: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Responsibilities:	
Reason for leaving: _____	
May Willows Way, Inc. contact this employer for verification of information provided on this form?	
Yes <input type="checkbox"/> No <input type="checkbox"/> Explanation, if applicable: _____	

Employer: _____	City/State: _____
From (Mo/Yr): _____ to _____	Job title: _____
Employment type: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Responsibilities:	
Reason for leaving: _____	
May Willows Way, Inc. contact this employer for verification of information provided on this form?	
Yes <input type="checkbox"/> No <input type="checkbox"/> Explanation, if applicable: _____	

**Volunteer, Internship, or Other Related Experience:**

Describe any volunteer, internships or other related experience you would like to share:

---

---

---

---

---

### **Education/Skills**

Do you have a high school diploma or high school equivalency diploma? Yes  No

*List any education you have beyond high school below.*

Name of School	City and State	# Credit Hours Completed	Area(s) of Study	Type of Degree <i>(e.g., A.S., B.S., M.S.)</i>	Degree Received?
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>

Note: Copies of diplomas and/or educational transcripts or equivalent are required upon employment.

### **License/Certification (e.g., Mandt, CPR, First Aid, CNA, LPN, RN, etc.)**

Name of Certification/License	Date of Issue	Expiration Date

Note: Copies of licenses/certificates or equivalent may be required upon employment.

### **Background Checks**

If you are listed as 'disqualified for employment' on any funder lists i.e. Division of Health & Senior Services, Department of Mental Health, or have been convicted of a 'disqualifying crime' per our funder guidelines, you may be ineligible for hire.

To the best of my knowledge, the answers on this application are true and correct. I realize that falsification of any of the application information may be cause for (1) not being employed, or (2) termination, if hired. Failure to answer all of the

requested information on this application may result in my not being considered for employment. Furthermore, I understand that Willows Way is an At Will Equal Opportunity Employer. I understand that I will be required to pass any required background checks if offered a position with Willows Way.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **Applicant Availability**

Please Note: Willows Way, Inc. provides continuous **24-hour support** to people with disabilities. Applicants seeking to work directly with individuals with disabilities in our residential program may limit their opportunity for employment if they have limited availability, especially if seeking full-time employment.

### **During what time frames are you available to work :**

Sunday: \_\_\_\_\_  
Monday: \_\_\_\_\_  
Tuesday: \_\_\_\_\_  
Wednesday: \_\_\_\_\_  
Thursday: \_\_\_\_\_  
Friday: \_\_\_\_\_  
Saturday: \_\_\_\_\_

Are you available for \*asleep overnight shifts?      Yes                  No  
\*Asleep overnights paid at minimum wage

Are you available for awake overnight shifts?      Yes                  No

Additional availability information:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_