



Rainbow of Challenges, Inc.

P.O. Box 1540

Hope, AR 71802

Email: deborahhorton@rainbowofchallenges.org

(870) 777-4501 (main) (870) 777-8372 (fax)

Dear Applicant,

We appreciate your interest in employment with our organization. When the application is returned we require a copy of your high school diploma, G.E.D, or **OFFICIAL** transcript. We do require **COMPLETE** mailing addresses for present/past employers and educational references if applicable. Without this information the application will be considered incomplete.

Thanks again for your interest in our organization.

Sincerely,

Deborah Horton
Human Resources Manager

“The Rainbow of Challenges, Inc./ Omega Home Inc./PNCSS is in compliance with Title VI, VII, & VIII of the Civil Rights Act, and is operated, managed, and delivers its services without regard to race, color or national origin.”

An alternate format will be provided upon request

EQUAL OPPORTUNITY EMPLOYER

For Office Use Only:

1st Choice: _____ Contact Date: _____ Interview Date/Time: _____
2nd Choice: _____ Contact Date: _____ Interview Date/Time: _____
3rd Choice: _____ Contact Date: _____ Interview Date/Time: _____
Application Received: _____ Human Resources Approval: _____ Date: _____

Application for Employment

(Please Print Plainly)

Date: _____

Name: _____ Home Phone: _____ Cell: _____

Physical Address: _____
Street City State Zip

Mailing Address: _____
Street City State Zip

Email Address: _____

Position(s) applied for: Children Services Adult Services Waiver Services
 Any Position Support Services Other _____

How did you hear about this position? Radio Online Facebook/Twitter Newspaper
 Classified Walk-in Referral

Did a current employee refer you? _____ If yes, who? _____

What hours are you able to work? *(Check all that may apply.)*

- Full Time Part Time *(various weekday and weekend hours may be available)*
 Monday – Friday 8a - 4p 7a - 3p 6a - 2p Any Time
 Sunday - Thursday 4p – 9p 3p - 11p 11p - 7a Any Time
 Weekend Friday - Sunday 3p – 11p/7a – 11p/7a – 3p Any Time
 Saturday & Sunday 7:30a-11:30p
 Substitute

Were you previously employed by us? _____ If yes, when? _____

If application is considered favorable, what date will you be available to work? _____

Are you under 21 years of age? Yes No Are you eligible to be bonded? Yes No

If offered employment, can identification & authorization to work in the U.S. be provided? _____

Have you been: *(Explain any "yes" answer in the remarks section below.)*

- Arrested and/or Convicted of any felony crime? Yes No
Arrested and/or Convicted of any crime involving theft? Yes No
Discharged from any employment for theft/dishonesty/fraud? Yes No
Arrested and/or Convicted of any crime involving alcohol or drugs? Yes No
Arrested and/or Convicted of any crime involving sexual abuse? Yes No
Convicted of any crime involving battery or assault? Yes No
Denied parental, custodial, or visitation rights as a result of neglect or abuse of a child or an adult? Yes No

Note: Conviction record will not necessarily bar employment. Factors such as age and time of the offense, seriousness and nature of the violation, and the relationship of the crime to the position for which you are applying will be considered.

Remarks: _____

Education Information: Bring proof of education (i.e. diploma, official transcript, GED)

School	Name/Address of School Attended-Include City/State	Graduated	
		Yes	No
GED			
High School			
College(s)			
Business/Trade			

Foreign Language

Language	Speak		Read		Write	
	Yes	No	Yes	No	Yes	No

Training Information

Specialized Training and/or Apprenticeship	
Military Training	
Clubs or Professional Associations	
Extra-Curricular Activities	

Educational References

Name/Instructor	Complete Mailing Address	Phone Number	Class

Work History

List in order starting with **present** employer, must show past **10 years** of employment history. This section must be completed even if you are submitting a resume.

Present Employer	Supervisor Information	Dates Worked	
Name of Business:	Name of Supervisor/Title:	From:	To:
Address:	Address:	Job Title/Duties:	
City/State/Zip	City/State/Zip:		
Phone Number:			
Reason for Leaving:			

Past Employer	Supervisor Information	Dates Worked	
Name of Business:	Name of Supervisor/Title:	From:	To:
Address:	Address:	Job Title/Duties:	
City/State/Zip	City/State/Zip:		
Phone Number:			
Reason for Leaving:			

Past Employer	Supervisor Information	Dates Worked	
Name of Business:	Name of Supervisor/Title:	From:	To:
Address:	Address:	Job Title/Duties:	
City/State/Zip	City/State/Zip:		
Phone Number:			
Reason for Leaving:			

Past Employer	Supervisor Information	Dates Worked	
Name of Business:	Name of Supervisor/Title:	From:	To:
Address:	Address:	Job Title/Duties:	
City/State/Zip	City/State/Zip:		
Phone Number:			
Reason for Leaving:			

Past Employer	Supervisor Information	Dates Worked	
Name of Business:	Name of Supervisor/Title:	From:	To:
Address:	Address:	Job Title/Duties:	
City/State/Zip	City/State/Zip:		
Phone Number:			
Reason for Leaving:			

Past Employer	Supervisor Information	Dates Worked	
Name of Business:	Name of Supervisor/Title:	From:	To:
Address:	Address:	Job Title/Duties:	
City/State/Zip	City/State/Zip:		
Phone Number:			
Reason for Leaving:			

Past Employer	Supervisor Information	Dates Worked	
Name of Business:	Name of Supervisor/Title:	From:	To:
Address:	Address:	Job Title/Duties:	
City/State/Zip	City/State/Zip:		
Phone Number:			
Reason for Leaving:			

Work References - other than immediate supervisor

Name	Complete Mailing Address	Phone Number	Relationship

I hereby give permission to contact the employers listed above concerning my prior work experience.	
Signature:	Date:
If there is a particular employer(s) you do not wish us to contact, please indicate which ones and reason why.	
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NEPOTISM POLICY

Employees of ROC/OH/PNCSS avoid any actions that may be construed as nepotism and refrain from activities that would constitute a conflict of interest. The employment of relatives can cause various problems, including charges of favoritism conflicts of interest, family discord and scheduling conflicts that work to the disadvantage of both ROC/OH/PNCSS and its employees. This policy applies to all ROC/OH/PNCSS's positions, full- and part-time, regular and temporary; therefore, it is the policy of ROC/OH/PNCSS not to hire immediate family members if it creates:

- Supervisor/subordinate relationship with a family member in same component or service area;
- The potential for creating an adverse impact on work performance; or
- Either an actual conflict of interest or the appearance of a conflict of interest.

Prior approval must be obtained from the CEO or designee, before family members will be allowed to work in the same component or service area.

Employees who become immediate family members or establish a romantic relationship may continue employment as long as it does not involve any of the above. If one of the conditions should occur, attempts will be made to find a suitable position within ROC/OH/PNCSS to which one of the employees will transfer within sixty days. If a transfer is not feasible, the employees will be permitted to determine which of them will resign. If the employees cannot make a decision, the CEO will decide who will remain employed.

This policy does not apply to the "relatives" who already are employed by the ROC/OH/PNCSS as of the effective date of this policy. This waiver, however, may not be used as a basis for further exceptions subsequent to the effective date of this policy. The Department Director or their designee is ultimately responsible for correcting any situation that is prohibited by this policy.

For purposes of this policy, the term "relatives" includes the following relationships:

- | | |
|--------------------------------------|---|
| (1) <i>husband or wife</i> | (6) <i>brother or sister (in-law)</i> |
| (2) <i>son or daughter (in-law)</i> | (7) <i>grandmother or grandfather (in law)</i> |
| (3) <i>step relationships</i> | (8) <i>grandchild</i> |
| (4) <i>father or mother (in-law)</i> | (9) <i>cousins</i> |
| (5) <i>aunt or uncle</i> | (10) <i>nieces or nephews</i> |
| | (11) <i>similar relationships (i.e. significant others, godparents, etc.)</i> |

Family Members Name	Location Work	Position	Relationship

I have answered all questions completely and to the best of my knowledge. I also understand that I will be required to provide a copy of my driver's license, social security card and high school diploma and/or college certification. Therefore, I understand that providing this information is a condition of employment.

Rainbow of Challenges, Inc./OH/PNCSS is a drug-free and alcohol-free workplace. I understand that Rainbow of Challenges is an employment at will agency and relationship will be voluntary and I or Rainbow of Challenges can terminate the relationship at will, with or without cause at any time.

I, the below signed individual, hereby do declare that, to the best of my knowledge and my ability, the information on this application is true and factual. I understand that intentionally false statements could lead to my dismissal as an employee or rejection as an applicant. I also understand any position with this organization requires background checks and security clearance prior to employment, and that failure to meet these requirements may lead to my rejection as an applicant for any position.

Applicant Signature: _____ Date Signed: _____