



## EMPLOYMENT APPLICATION

Progressive Directions, Inc., is an equal opportunity employer and affords equal opportunity to all applicants without regard to race, color, creed, religion, ancestry, age, sex, marital status, disability or handicap, veterans' status, or any other status protected under local, state or federal laws.

### PERSONAL INFORMATION

Name (Print): \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 (First ) (Last) (MI)

Present Address \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_  
 \_\_\_\_\_ Email Address \_\_\_\_\_  
 (City) (State) (Zip)

Are you at least the age of 18?  Yes  No Agency insurance requires employees be at least 18 years of age.

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?  Yes  No

Can you produce documented proof of your eligibility for employment in the United States?  Yes  No

*(If offered employment, you will be required to provide documentation to verify eligibility.)* Today's Date \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ What date would you be available to work? \_\_\_\_\_

Type of employment  Full-Time  Part-Time  PRN Rate of pay expected \_\_\_\_\_

Days and Hours Available *(If employed, I will notify my supervisor in writing, should my availability change.)*

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

### EDUCATION *(Proof of Education must be provided with application)*

Type of School	Name and City/State	Courses Majored In	Number of Years Completed				Year Graduate-(List Degree)
			1	2	3	4	
High School or Equivalent							
College and/or Vocational							
Other Training or Degrees i.e. Military Training							

Have you applied for a job with us before? *(If yes, please give date)* \_\_\_\_\_ Have you ever worked for us before? *(If yes, please give date)* \_\_\_\_\_

How did you hear about us?  Newspaper Ad  Employment agency  Other \_\_\_\_\_  Current Employee \_\_\_\_\_

**Notice – This position requires a criminal background check. Therefore, you may be required to provide information about your criminal history in order to be considered for this position.**

Have you ever been convicted of a criminal offense, either misdemeanor and/or felony in the last 7 years?  Yes  No

If yes, provide date, court, final disposition and place where the offense occurred \_\_\_\_\_

Do you currently have pending charges or are you under investigation for any violation of the law?  Yes  No

Have you had any moving violations within the last three years?  Yes  No If yes, provide dates and violations: \_\_\_\_\_

Do you have a valid driver's license? *(Must be provided with application)*  Yes  No

Have you ever been required to register as a sex offender?  Yes  No

All employees are required to attend training Mon-Fri 8am-4pm, (minimum of one week).  
 Will you be able to attend all required training?  Yes  No

Can you perform the essential functions of this job with or without reasonable accommodations?

A reasonable accommodation is any change to the application or hiring process, to the job, to the way the job is done, or the work environment that allows a person with a disability who is qualified for the job to perform the essential functions of that job and enjoy equal employment opportunities. Accommodations are considered "reasonable" if they do not create an undue hardship or a direct threat. (Any questions and/or concerns about the functions of the job, may be addressed at the interview)

\_\_\_ Yes \_\_\_ No

If yes, explain \_\_\_\_\_

Have you ever been discharged or asked to resign from a position?

Are you employed now? \_\_\_ Yes \_\_\_ No Why do you desire to make a change?  
\_\_\_\_\_

Have you ever held a position of trust (handling money or confidential material)?

\_\_\_ Yes \_\_\_ No

Do you have any relatives that are currently employed and/or a Board Member of Progressive Directions, Inc.?

\_\_\_ Yes \_\_\_ No

If yes, provide name and relationship to you. \_\_\_\_\_

**WORK HISTORY** (Start with most recent or present employer, must include a minimum of five years. Previous salaries or wages will not be used to determine compensation at PDI.)

<b>1. Name and Address of Most Recent Employer</b>		<b>Telephone No.</b>
<b>Immediate Supervisor (Name &amp; Position)</b>	<b>Dates of Employment</b> From:                      To:	<b>Salary Rate</b> Start:                      End:
<b>Description of Duties</b>		<b>Job Title</b>
<b>Reason for Leaving and Explanation</b>		<b>May we contact this employer?</b> ___ Yes                      ___ No
<b>2. Name and Address of Former Employer</b>		<b>Telephone No.</b>
<b>Immediate Supervisor (Name &amp; Position)</b>	<b>Dates of Employment</b> From:                      To:	<b>Salary Rate</b> Start:                      End:
<b>Description of Duties</b>		<b>Job Title</b>
<b>Reason for Leaving and Explanation</b>		<b>May we contact this employer?</b> ___ Yes                      ___ No
<b>3. Name and Address of Former Employer</b>		<b>Telephone No.</b>
<b>Immediate Supervisor (Name &amp; Position)</b>	<b>Dates of Employment</b> From:                      To:	<b>Salary Rate</b> Start:                      End:
<b>Description of Duties</b>		<b>Job Title</b>
<b>Reason for Leaving and Explanation</b>		<b>May we contact this employer?</b> ___ Yes                      ___ No
<b>4. Name and Address of Former Employer</b>		<b>Telephone No.</b>
<b>Immediate Supervisor (Name &amp; Position)</b>	<b>Dates of Employment</b> From:                      To:	<b>Salary Rate</b> Start:                      End:
<b>Description of Duties</b>		<b>Job Title</b>
<b>Reason for Leaving and Explanation</b>		<b>May we contact this employer?</b> ___ Yes                      ___ No

Explain any gaps in work history:

\_\_\_\_\_

\_\_\_\_\_

Please provide any additional information such as special skills or languages you speak, training, management experience, equipment operation, or qualifications you feel will be helpful to us in considering your application for employment.

\_\_\_\_\_

**\*PLEASE READ CAREFULLY BEFORE SIGNING\***

**APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION STATEMENT FOR RELEASE OF INFORMATION**

I hereby consent to submit to urinalysis and/or other tests as shall be determined **Progressive Directions, Inc.** in the selection process of applicants for employment, for the purpose of determining the drug content thereof. I agree that **WorkForce Essentials, Inc.** may collect these specimens for these tests and may test them or forward them to a testing laboratory designated by the company for analysis. I further agree to and hereby authorize the release of the results of said tests to the company. I understand that it is the current illegal use of drugs and/or abuse of alcohol that prohibits me from being employed at this Company.

I further agree to hold harmless the Company and its agents (including the above named physician or clinic) from any liability arising in whole or part out of the collection of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my employment application. I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

**Applicant:**

**Print Name** \_\_\_\_\_ **S.S.#:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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I certify that all the information provided by me in this application (or any other accompanying or required documents) is correct, accurate, and complete to the best of knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I hereby authorize any and all schools, past employers, references, courts and any others who have information about me to provide such information to Progressive Directions, Inc. (PDI), and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damages that may result from providing such information. I understand that if offered a position with PDI a Tennessee-licensed private investigation company will conduct a criminal background check. I understand that unsatisfactory results from these checks will result in withdrawal of any employment offer or termination of employment if already employed.

I understand that submission of an application does not guarantee employment. I further understand that should an offer of employment be extended by PDI such employment with PDI is at will, for no specified duration and may be terminated by either PDI or myself at any time, with or without cause or notice. I understand none of the documents, policies, procedures, actions, statements of PDI or its representatives used during the employment process is deemed a contract of employment real or implied.

In consideration for employment with PDI, if employed, I agree to conform to the guidelines, regulations, policies and procedures outlined by PDI and Tennessee Department of Human Services (DHS) at all times and understand that such compliance is a condition of employment. I understand that due to the nature of PDI business, attendance and punctuality are considered essential requirements of every job at PDI and that poor attendance or tardiness will result in disciplinary action.

I understand all employees are required to attend competency-based training and must achieve a completed score of 80% to pass. All information and testing is administered through the Relias Learning System on a computer in a classroom setting. I must be available to attend Mon-Friday 8a-4p. I understand unsatisfactory performance during the training will result in withdrawal of any employment offer or termination of employment if already employed.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period, I must fill out and submit a new application.

I, the undersigned applicant, certify and affirm that, to the best of my knowledge and belief, I [**"have" or "have not," as applicable**] had a case of abuse, neglect, mistreatment or exploitation substantiated against me. As a condition of submitting this application and in order to verify this affirmation, I further release and authorize PROGRESSIVE DIRECTIONS, INC., the Tennessee Department of Intellectual and Developmental Disabilities and the Bureau of TennCare to have full and complete access to any and all current or prior personnel or investigative records, from any party, person, business, entity, or agency, whether governmental or non-governmental, as pertains to any allegations against me of abuse, neglect, mistreatment, or exploitation and to consider this information as may be deemed appropriate. This authorization extends to providing any applicable information in personnel or investigative reports concerning my employment with this employer to my future employers who may be Providers of DIDD services.

**BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE STATEMENTS.**

\_\_\_\_\_  
**(Signature of Applicant)**

\_\_\_\_\_  
**(Date)**

**PERSONAL REFERENCES** (Do Not List Relatives or Former Supervisors) One reference must have known a minimum of 5 yrs.

Name	Address	Telephone	Relationship/Occupation	Years Known

**Progressive Directions, Inc.,** was chartered by the State of Tennessee as a private not-for-profit organization in 1976. Our mission is to serve the people of Montgomery and Stewart Counties, acting in the public interest by providing quality services to individuals with intellectual and/or developmental disabilities. In order to fulfill this commitment, we are searching for caring people to provide services and supports for the individuals we serve in our many programs.

**Please complete the following questions as part of the employment application process. Please provide complete, neatly written answers. To make corrections use one line, when marking through anything. If you do not know an answer, put that you do not know. Do not leave any question blank. For additional space, utilize the back of this page.**

## Affirmative Action Program Information Form

Progressive Directions, Inc. is an Equal Opportunity Employer. As required by law, we must record certain information to be made a part of our Affirmative Action Program.

Applicants for employment are also invited to participate in the Affirmative Action Program by reporting their status as handicapped, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include our Affirmative Action Program. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

### Section 1: General Applicant Information

Name:	Date:
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### Position applied for:

### Section 2: Please check all that apply below:

#### Race or Ethnic Identity

- Hispanic or Latino
- White (not Hispanic or Latino)
- Black or African American (not Hispanic or Latino)
- Native Hawaiian or Pacific Islander (not Hispanic or Latino)
- Asian (not Hispanic or Latino)
- American Indian or Alaskan Native (not Hispanic or Latino)
- Two or More Races (not Hispanic or Latino)
- I do not wish to Self-Identify

Signature \_\_\_\_\_

#### Veteran Status

- Vietnam Era Veteran
- Special Disabled Veteran
- Other Eligible Veteran
- Other \_\_\_\_\_
- Individual with Disabilities

#### Gender

- Male
- Female

### How did you hear about our openings?

- Current Employee \_\_\_\_\_
- Recruiter
- Newspaper ad
- Other – Explain Below: \_\_\_\_\_

Human Resources Use Only

AAP Info

Job Group