

706 Executive Blvd., Valley Cottage, New York 10989 Phone: 845-268-8200 Fax: 845-268-8100 175 Clearbrook Road, Suite 161, Elmsford, New York 10523 Phone: 914-946-2288 Fax: 914-347-3025

Thank you for your interest in joining Another Step, Inc.

In order to be considered for employment, this application must be completed in full. This application will be given every consideration, but its receipt does not imply an offer of employment. Applicants will be considered for vacancies, which arise during a 90 day period following submission. Applicants should complete an updated application if not contacted and/or hired during this 90 day review period.

APPLICANT INFORMATION

Name:		Date:			
Street Address:					
City:	State:	Zip Code:			
city.	State.	zip code.			
u Bl	C II DI	- 1			
Home Phone:	Cell Phone:	Email:			
How did you bear shout us?	ont Employee Deferred Femily Deferred	Former Employee Other			
	ent Employee Referral Family Referral eed.com, John Smith, Community Location, Former DSP				
Have you applied to our Agency in the Past?	Yes No If yes, when?				
EMPLOYMENT STATUS					
Are you at least 18 years of age? Yes No					
Are you at least 18 years of age? Yes No					
Are you currently authorized to work in the United States? Yes No					
Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws,					
Another Step, Inc. will verify the identity and employment status of every individual offered employment with the Agency.					
FNADLOVNAFNIT DECIDED					
EMPLOYMENT DESIRED					
Position applied for:					
Are you capable of performing the essential functions of the job for which you are applying, with or without Yes No					
reasonable accommodation?					



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EMPLOYMENT HISTORY

Please list your four (4) most recent employers. If you do not have previous employment you may list any volunteer or military service.

Employer 1

Employer Name:	Supervisors' Name & Title:
Employer Address:	Contact Information:
	Office Phone:
	Email:
Your Position/Title:	Dates of Employment: Month/Year
Please describe your job functions:	
Reason for Separation: Resignation Termination Other	
Please explain reason for separation:	
May we contact this employer? Yes No	
If no, may we contact this employer after an offer of employment has been accepted?	es No
Employer 2	
Employer Name:	Supervisors' Name & Title:
Employer Address:	Contact Information:
	Office Phone:
	Email:
Your Position/Title:	Dates of Employment: Month/Year
Todi i osidony ride.	Dates of Employment. Monthly real
Please describe your job functions:	
,	
Reason for Separation: Resignation Termination Other	
Please explain reason for separation:	
May we contact this employer?YesNo	
	s No
If no, may we contact this employer after an offer of employment has been accepted?Ye:	s No



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Employer 3	
Employer Name:	Supervisors' Name & Title:
Employer Address:	Contact Information:
	Office Phone:
	Email:
Your Position/Title:	Dates of Employment: Month/Year
Please describe your job functions:	
Reason for Separation: Resignation Termination Other Please explain reason for separation:	
May we contact this employer?Yes No	
If no, may we contact this employer after an offer of employment has been accepted?	es No
Employer 4	
Employer Name:	Supervisors' Name & Title:
Employer Address:	Contact Information:
Employer Address.	Office Phone:
Your Position/Title:	Email: Dates of Employment: Month/Year
Tour Position/Title.	Dates of Employment. Month/Year
Please describe your job functions:	
Reason for Separation: Resignation Termination Other	
Please explain reason for separation:	
May we contact this employer? Yes No	
If no, may we contact this employer after an offer of employment has been accepted?	YesNo



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SKILLS: Please list below any additional skills or qualifications you possess, relevant to the position for which you are applying				

PROFESSIONAL REFERENCES

Please list three (3) professional references. If you are a recent graduate, you may list school professors, school counselors, volunteer service and/or military service NOTE: family and friends are not professional references

Reference Name	Employer	Relationship	Phone & Email

EDUCATION

Please list all Educational institutions attended below, starting with High School

Institution Name	Location	Years Completed	Did you Graduate	Type of Diploma/Degree Received
High School				
College				
Continued Education				
Business/Trade School				

Additional Training: Please list below any additional training or courses completed, relevant to the position for which you are applying



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DRIVING HISTORY Do you have a valid non-provisional Driver's License? Yes No If yes, indicate date issued? Have you had any accidents during the past three (3) years? _____ Yes _____ No If yes, how many? If yes, please provide additional information: Have you had any moving or parking violations during the past three (3) years? _____ Yes _____ No If yes, how many? If yes, please provide additional information: Has your Driver's License been suspended during the past three (3) years? _____ Yes _____ No If yes, how many? If yes, please provide additional information: Have you been convicted of a DWI or DUI during the past three (3) years? _____ Yes _____ No If yes, how many? If yes, please provide additional information: **VEHICLE INFORMATION** Do you have access to a reliable vehicle to utilize for business purposes? _____ Yes _____ No If yes, are you a covered driver under the vehicle's insurance policy? _____ Yes _____ No **CRIMINAL BACKGROUND INFORMATION** Applicants are required to disclose all past criminal convictions and any charges currently pending. Upon the acceptance of an offer of employment all new hires will be required to submit to a criminal background check before commencing employment. Have you ever been **convicted** of a felony or misdemeanor? ____ Yes ____ No If yes, please provide date and description of conviction(s): Do you currently have any felony or misdemeanor charge(s) **pending**? _____ Yes _____ No If yes, please provide date and description of charge(s):



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Federal Driver Privacy Protection Act Authorization to Obtain Motor Vehicle Report

For the sole purpose of the determination and evaluation of my mot compliance,	tor vehicle operating recor	d and pursuant to the State and Federal regulations of
I (Name of Applicant/Employee)		authorize
Rose & Kiernan, Inc. to obtain my Motor Vehicle Record. I understan	d that this record may con	tain personal information* in addition to any/all driver
olations and/or accidents, which may be on record through theState Departme		e Department of Motor Vehicles.
Address on Driver's License:		
City:	State:	Zip Code:
Driver's License #:	State:	Date of Birth:
Current Street Address/Mailing Address:		
City:	State:	Zip Code:
I authorize release of the above information to my employer (or p	roposed employer).	
Applicant/Employee Signature:		
Date Signed:		

^{*}Personal information means information that identifies an individual including an individual's photograph, social security number, driver identification number, name, address and telephone number. It does not include information on vehicular accidents, driving violations and driver status.



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SCHEDULE REQUESTED

Please indicate days and times you are available for work

Time	EXAMPLE	SUN.	MON.	TUES.	WED.	THURS.	FRI.	SAT.
7:00am	х							
8:00am	х							
9:00am	х							
10:00am	х							
11:00am	х							
12:00pm	х							
1:00pm	х							
2:00pm	х							
3:00pm	х							
4:00pm								
5:00pm								
6:00pm								
7:00pm								
8:00pm	х							
9:00pm	х							
10:00pm	х							
11:00pm	х							
12:00am	х							
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4:00am								
5:00am								
6:00am								



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EQUAL OPPORTUNITY EMPLOYER

Another Step, Inc. is an equal opportunity employer. We consider applications for employment without regard to race, color, religion, sex, national origin, age, sexual orientation or any non-job related disability. Equal access to programs, service and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify our Human Resources Coordinator.

It is Another Step, Inc.'s policy that applicants for employment are recruited, selected and hired on the basis of individual merit and ability, with respect to the specific position being filled. The Agency specifically forbids unlawful discrimination in regard to race, color, religion, sex, national origin, age, sexual orientation or any other legally protected status.

VOLUNTARY SELF-IDENTIFICATION

We are subject to certain government recordkeeping and reporting requirements for the administration of civil rights laws and regulations.
Submission of this information is voluntary and refusal to provide the below information will not subject you to any adverse treatment.
Gender: MaleFemale
Ethnicity/Race
Hispanic or Latino
A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race
White (Not Hispanic or Latino)
A person having origins in any of the original peoples of Europe, the Middle East or North Africa
Black or African American (Not Hispanic or Latino)
A person having origins in any of the black racial groups of Africa
Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Island
Asian (Not Hispanic or Latino)
A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including Cambodia, China,, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam
American Indian or Alaska Native (Not Hispanic or Latino)
A person having origins in any of the original peoples of North or South America (including Central America), and who maintain tribal affiliations
Two or More Races (Not Hispanic or Latino)
All persons who identify with more than one (1) of the above five (5) races
Are you a member of the Armed Forces? YesNo
Are you a Veteran? Yes No
Are you a Disabled Veteran? Yes No



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DISCLAIMER AND AUTHORIZATION FOR RELEASE OF INFORMATION

I affirm that I have read and fully understand the questions asked in this application. I hereby certify the information I have provided on this application, resume, given verbally or provided on any other materials, is true and complete to the best of my knowledge. I understand that any misrepresentation or omission of fact in my application, resume, given verbally or provided on any other materials, can be justification for refusal of employment or if employed, immediate termination of my employment with Another Step, Inc.

Another Step Inc. or its agents may seek to verify the information on this application. As such, I hereby authorize Another Step, Inc. and its agents to contact any former employer or any representative of any other organization to which I have referenced on this application, resume, given verbally or provided on any other materials, and hereby authorize said employer and/or representative to provide information to Another Step, Inc. on my behalf. Furthermore, I hereby release from liability any persons, companies or institution supplying such information to Another Step, Inc. and shall hold Another Step Inc. harmless from liability arising out of decisions made based on that information.

I understand and agree that all work product developed during my employment at Another Step, Inc. is the property of Another Step, Inc. and no attempt will be made to deliver or use said work product for any purpose other than the benefit of Another Step, Inc. I understand that all records, including copies, are the property of Another Step, Inc.

I understand this application is not an offer of employment and in the event that I am hired, my employment will be "at will" and either Another Step, Inc. or I may terminate my employment at any time, with or without cause and with or without notice.

I acknowledge that I have read and understand all of the above statements				
Applicant Signature:	Date:			