

ADDS

Employment Application

ANDREW DEVELOPMENTAL DISABILITIES SERVICES, LLC

92 N. Yearling Road
Whitehall, Ohio 43213
(614) 439-1930

www.addsohio.com

Andrew Developmental Disabilities Services, LLC (ADDS) is an Equal Opportunity Employer providing opportunities for applicants and employees based upon such qualities as ability, performance, skill potential, and general fitness without regard to race, color, religion, sex, national origin, ancestry, age, or any special developmental needs.

Employment requirements include; *Applicants must be able to speak, read, write and understand the English language. Given the communicative challenges many consumers face it is imperative that this agency not impose additional potential barriers.* You must have a vehicle while on-duty, a valid Ohio Driver's License with no more than 6 points on your driving record; proof of automobile insurance; no felony convictions; and a high school or GED certificate. A personal criminal background check will be completed by ADDS, LLC

Additionally, once an offer of employment is made, the applicant must successfully complete a CPR and First Aid certification; and a passing grade (80% or higher) on the Certification Instructional and OSHA testing. There will be two opportunity to successfully pass the Certification test.

Please complete the information below printed in your own handwriting using a pen.

Date: _____ Phone # (____) _____
S.S.N. _____

Name: _____ Address: _____

City: _____ States: _____ Zip Code: _____

Have you previously been employed by Andrew Developmental Disabilities Services, LLC. ?

No ___ Yes ___ When ? _____

Please give the name(s) of persons on our company you know: _____

How did you hear about our company? _____

WHAT POSITION DO YOU DESIRE: _____ FULL-TIME OR PART-TIME (Circle choice)

SHIFT (Circle choice): MONDAY THRU FRIDAY WEEKENDS 1st FIRST 2nd SHIFT 3rd SHIFT

Pay Rate desired? _____ Per hour; Per visit; or Annually.

Are you legally authorized to work in the United States? Yes ___ or No ___; If yes provide proof

Have you been a resident of the State of Ohio for the past five (5) years? Yes ___ No ___

If not, list the cities and states you have resided in during the past five (5) years: _____

City _____ State _____ City _____ States _____

In case of emergency notify: _____ Phone #: () - _____

Have you served in the U.S. Armed Forces? Yes _____ No _____

Branch of Service: _____ Rank at Discharge: _____

Date entered Service: _____ Date of Discharge: _____

Valid Ohio Driver License #: _____ List all driving offenses during the past 3 years:

EDUCATION:

Do you have a HIGH SCHOOL DIPOLMA or G.E.D. CERTIFICATE or NONE (circle one)

Name of high school or G. E.D. program: _____

City: _____ State: _____ Zip Code _____

College or University Attended: _____

City: _____ State: _____ Zip Code: _____

List additional training or educational certificates/degrees received related to this field:

PROFESSIONAL AND CHARACTER REFERENCES:

List at least three (3) references you have known for one (1) year or more. Please **DO NOT** list relatives.

Name: _____ Phone #: _____

Address: _____ Relationship: _____

Name: _____ Phone #: _____

Address: _____ Relationship: _____

Name: _____ Phone #: _____

Address: _____ Relationship: _____

EMPLOYMENT HISTORY

List all present and past employment, including any work in the Developmental Disability field, beginning with the most recent job. You may attach your resume as well.

Company: _____

Address: _____ City: _____ State: _____ Zip Code _____

Phone #: _____ Position: _____ Supervisor _____

Dates Employed: _____ to _____ Reason for Leaving: _____

Describe the work you performed: _____

Company: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone #: _____ Position: _____ Supervisor: _____

Dates Employed: _____ to _____ Reason for Leaving: _____

Describe the work you performed: _____

Company: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone #: _____ Position: _____ Supervisor: _____

Dates Employed: _____ to _____ Reason for Leaving: _____

Describe the work you performed: _____

Company: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone #: _____ Position: _____ Supervisor: _____

Dates Employed: _____ to _____ Reason for Leaving: _____

Describe the work you performed: _____

Please describe, in your own words, what a developmental disability is and how you feel persons with developmental disabilities should be treated in our society:

Why are you interested in this job? _____

What qualities do you possess that will benefit the individuals we serve?

If you were developmentally disabled, what would you expect from someone who was hired to come into your home to provide supported living services to you?

BACKGROUND RESEARCH RELEASE

Please read this section carefully and acknowledge your understanding by signing your name in the space below.

I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge.

1. Consent to Conduct Background Investigation.

As a condition of and in consideration for ADDS, LLC consideration of this application, I give permission to ADDS, LLC to investigate my personal and employment history. I understand that this background investigation will include, but not be limited to, verification of all information on this application, interviews with past employers, criminal records check, Ohio Department of Developmental Disabilities Abuser Registry, and the State of Ohio Nursing Aide Abuser Registry. I further give permission to ADDS, LLC to conduct this investigation and to discuss the results of this investigation in connection with my application of employment.

2. Consent to Contact Past Employers

I give permission to ADDS, LLC to contact all employers listed in this application (except those specifically excluded) for references. Further give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with ADDS, LLC consent to the release of such information orally or in writing, and hereby release them from all liability and agree not to sue them for defamation or other claims based upon any statements they make to any representative of ADDS, LLC I further waive all rights I may have under state law to receive a copy of any written statement provided by any of my former employers to ADDS, LLC I further agree to indemnify all past employers for any liability they may incur because of their reliance upon this release.

3. Consent to Contact Government Agencies

I give permission to any agent, attorney or representative of ADDS, LLC to receive a copy of any information obtained in the file of any federal, state, or local court, governmental agency, law enforcement agency or investigator concerning or relating to me. I further consent to the release of such information and waive any right under state law concerning notification of the request for a release of such information. In the event a state law does not provide for prospective employers to have access to information, I hereby delegate ADDS, LLC as my agent for receipt of information. I understand that the scope of this investigation will be limited to criminal and/or civil records that relate to my honesty, integrity and/or abilities.

4. Cooperation with Investigation.

I agree to fully cooperate in ADDS, LLC background investigation, and to sign any waivers or releases that may be necessary to obtain access to relevant information. In the event that any former employer or federal, state, or local governmental agency will not release reference information or criminal history information directly to the employer, I agree to personally request such information to the extent of the law.

5. Falsification Statement

I understand that any falsification or willful omission of fact made in this application or in connection with any background investigation may be sufficient grounds for rejection of this application, or, if discovered after an offer or employment, for immediate dismissal.

EMPLOYMENT APPLICATION & AT-WILL ACKNOWLEDGMENT

If I am employed, I agree that in consideration for my employment, I will conform to the rules and regulations of ADDS, LLC. I understand that those rules and regulations may be altered, amended or repealed by ADDS, LLC at any time, at ADDS, LLC's sole option and without any prior notice to employees.

I acknowledge that if I am employed, my employment and compensation can be terminated at any time, with or without cause or notice, at the option of either ADDS, LLC or myself. I understand that no representative of ADDS, LLC has any authority to enter into any agreement for employment for any specified period of time, to assure any benefits or terms and conditions of employment, or to make any agreement contrary to the forgoing, except the President/CEO of ADDS, LLC, who may only do so in writing.

Applicant's Signature

Date

Have you ever been convicted of or plead guilty to any crime? _____ Yes _____ No

If yes, pursuant to the Ohio Revised Code 5123:2-3-06 you must provide the following information:

1) Describe the conviction(s) and/or any plea(s) of guilt:

2) Describe where (state, county, city) the conviction(s) or plea(s) of guilt took place:

Applicants printed name

Date

Applicants signature

Date

In accordance with the Ohio Revised Code 5123 :2-3-06, the following offenses will disqualify you from employment with Andrew Developmental Disabilities Services, LLC.

- (a) 2903.01 (aggravated murder).
- (b) 2903.02 (murder)
- (c) 2903.03 (voluntary manslaughter)
- (d) 2903.04 (involuntary manslaughter).
- (e) 2903.11 (felonious assault).
- (f) 2903.12 (aggravated assault).
- (g) 2903.13 (assault).
- (h) 2903.16 (failing to provide for a functionally impaired person).
- (i) 2903.21 (aggravated menacing).
- G) 2903.34 (patient abuse and neglect).
- (k) 2905.01 (kidnapping).
- (l) 2905.02 (abduction).
- (m) 2905.03 (criminal child enticement).
- (n) 2907.02 (rape).

- (o) 2907.03 (sexual battery).
 - (p) 2907.04 (unlawful sexual conduct with a minor, formerly corruption of a minor).
 - (q) 2907.05 (gross sexual imposition).
 - (r) 2907.06 (sexual imposition).
 - (s) 2907.07 (importuning).
 - (t) 2907.08 (voyeurism).
 - (u) 2907.09 (public indecency).
 - (v) 2907.21 (compelling prostitution).
 - (w) 2907.22 (promoting prostitution).
 - (x) 2907.23 (procuring).
 - (y) 2907.25 (prostitution).
 - (z) 2907.31 (disseminating matter harmful to juveniles).
 - (aa) 2907.32 (pandering obscenity).
 - (bb) 2907.321 (pandering obscenity involving a minor).
 - (cc) 2907.322 (pandering sexually oriented matter involving a minor).
 - (dd) 2907.323 (illegal use of a minor in nudity-oriented material or performance).
 - (ee) 2911.01 (aggravated robbery).
 - (ff) 2911.02 (robbery).
 - (gg) 2911.11 (aggravated burglary).
 - (hh) 2911.12 (burglary).
 - (ii) 2919.12 (unlawful abortion).
- 5123:2-3-066
- (jj) 2919.22 (endangering children).
 - (kk) 2919.24 (contributing to unruliness or delinquency of a child).
 - (ll) 2919.25 (domestic violence).
 - (mm) 2923.12 (carrying a concealed weapon).
 - (nn) 2323.13 (having weapons while under disability).
 - (oo) 2923.161 (improperly discharging a firearm at or into a habitation or school).
 - (pp) 2925.02 (corrupting another with drugs).
 - (qq) 2925.03 (trafficking in drugs).
 - (rr) 2925.04 (illegal manufacture of drugs or cultivation of marihuana).
 - (ss) 2925.05.05 (funding of drug or marihuana trafficking).
 - (tt) 2925.06 (illegal administration or distribution of anabolic steroids).
 - (uu) 3716.11 (placing harmful objects in food or confection).
 - (vv) 2905.04 (child stealing) as it existed prior to July 1, 1996.
 - (ww) 2919.23 (interference with custody) that would have been a violation of section 2905.04 of the Revised Code as it existed prior to July 1, 1996, had the violation occurred prior to that date.
 - (xx) 2925.11 (possession of drugs) that is not a minor drug possession offense as defined in this rule.
 - (yy) Felonious sexual penetration in violation of former section 2907.12 of the Revised Code; (2) A felony contained in the Revised Code that is not listed in paragraph (G) of this rule, if the felony bears a direct and substantial relationship to the duties and responsibilities of the position being filled;
 - (3) Any offense contained in the Revised Code constituting a misdemeanor of the first degree on the first offense and a felony on a subsequent offense, if the offense bears a direct and substantial relationship to the position being filled and the nature of the services being provided.
 - (4) A violation of an existing or former municipal ordinance or law of this state, 5123:2-3-067 or any other state, or the United States, if the offense is substantially equivalent to any offenses listed or described in paragraph (G)(1), (G) (2), or (G) (3) of this rule.
 - (H) The offenses listed in paragraph (G) (1) of this rule or a violation of an existing or former municipal ordinance or law of this state, any other state, or the United States, if the offense is substantially equivalent to any offenses listed or described in paragraph (G) (1) of this rule bear a direct and substantial relationship to the duties and responsibilities of the position with a license that involves providing direct services.

I attest I have not been convicted of, or pled guilty to any of the offenses listed above. I also attest that I have accumulated no more than six (6) points against my Ohio Drivers License. Additionally, I understand it is my responsibility as an employee of ADDS, LLC to notify my supervisor or the President / Chief Executive Officer within 10 days, if I am charged with, convicted of, or plead guilty to any of the above mentioned offenses during my employment with ADDS, LLC. I also agree to notify ADDS, LLC if I accumulate more than six (6) points against my driver's license. Failure to notify ADDS, LLC of the above mentioned offenses will result in immediate termination.

I understand that due to the nature of the business, working with people with developmental disabilities, ADDS, LLC reserves the right to deny me employment if I have been charged with, convicted of or pled guilty to any fraud related crimes.

Applicant's Printed Name

Date

Applicant's Signature