

**Stopping Woman Abuse Now, Inc –SWAN**  
**PO Box 176, Olney, IL, 62450**  
**Ph: 618-879-2214 ~ [www.swandvhl.org](http://www.swandvhl.org)**  
**Executive Director: Linda Warner**  
**[lwarner@swandvhl.org](mailto:lwarner@swandvhl.org)**

**EMPLOYMENT APPLICATION**

**PERSONAL INFORMATION**

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

DATE AVAILABLE: \_\_\_\_\_

DESIRED PAY: \_\_\_\_\_ POSITION APPLIED FOR: \_\_\_\_\_

**EMPLOYMENT ELIGIBILITY**

ARE YOU A US CITIZEN?                      YES      NO

\*IF NO, ARE YOU ALLOWED TO WORK IN THE US?      YES      NO

HAVE YOU EVER WORKED FOR SWAN BEFORE?      YES      NO

\*IF YES WRITE THE START AND END DATES \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY?      YES      NO

\*IF YES, PLEASE EXPLAIN: \_\_\_\_\_

DO YOU HAVE A CRIMINAL HISTORY THAT INCLUDES SEXUAL OFFENSES AND/OR VIOLENCE AGAINST YOUTH?      YES      NO

\*IF YES, PLEASE EXPLAIN: \_\_\_\_\_

### EDUCATION

HIGH SCHOOL: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

GRADUATED?        YES    NO

COLLEGE \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

GRADUATED?        YES    NO

DEGREE: \_\_\_\_\_

OTHER: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

DEGREE: \_\_\_\_\_

### EMPLOYMENT/VOLUNTEER HISTORY

EMPLOYER: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ STARTING PAY: \_\_\_\_\_ ENDING PAY: \_\_\_\_\_

RESPONSIBILITIES:

\_\_\_\_\_  
\_\_\_\_\_

REASON FOR LEAVING:

\_\_\_\_\_

EMPLOYER \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ STARTING PAY: \_\_\_\_\_ ENDING PAY: \_\_\_\_\_

RESPONSIBILITIES:

\_\_\_\_\_  
\_\_\_\_\_

REASON FOR LEAVING:

\_\_\_\_\_

EMPLOYER \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ STARTING PAY: \_\_\_\_\_ ENDING PAY: \_\_\_\_\_

RESPONSIBILITIES:

\_\_\_\_\_  
\_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

**REFERENCES**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**BACKGROUND CHECK CONSENT**

**ALL HIREES ARE REQUIRED TO COMPLETE THE FOLLOWING BACKGROUND CHECKS**

- **DCFS – CANTS BACKGROUND**
- **ILLINOIS STATE POLICE FINGERPRINTING**
  
- **ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK?    YES    NO**

**DISCLAIMER**

**Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with application being fully completed in order for it to be considered.**

**I, the applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.**

**SIGNATURE: \_\_\_\_\_**

**DATE: \_\_\_\_\_**

**PRINTED NAME: \_\_\_\_\_**