



YOUTH ADVOCATE PROGRAMS, INC.

P.O. Box 950 2007 North Third Street

Harrisburg PA 17108

PHONE: 717-232-7580 FAX: 717-233-2879

EMPLOYMENT APPLICATION

Youth Advocate Programs, Inc. is an Equal Opportunity Employer and does not discriminate on the basis of race, sex, age, religion, marital status, national origin, sexual preference or disability.

_____ Position _____ Date of Application

For our recruitment purposes please answer the following: How did you hear about this position?

- YAP Website Newspaper Monster.com YAP Employee
- Friend Other _____

GENERAL INFORMATION

_____ Name (last) _____ Name (first, middle)

_____ Home Address _____ City _____ State _____ Zip

_____ Telephone (daytime) _____ Telephone (evening)

Email Address (optional): _____

How long have you lived at this address? _____

List last three previous addresses and dates:

_____/_____/_____

_____/_____/_____

_____/_____/_____

How many different addresses have you had in the last 5 years? _____ 10 years? _____

Are you over 18 years of age? Yes No

When are you available to work? (Please check all that apply)

- Full-Time Part-Time
- Days Evenings Weekends

Employment Application (Continued)

Do you have a valid driver's license? Yes No

If yes, please provide: _____
License number State Expiration Date

Has your driver's license ever been suspended? Yes No

If yes, please give dates and explain: _____

Do you currently have any traffic violation points against you? Yes No

If yes, how many? _____

Are you currently insured and have unrestricted access to a vehicle with at least \$100,000/\$300,000 liability coverage (required for any position where clients are transported)? Yes No

Have you had any accidents in the last three years? Yes No

If yes, please give dates and indicate damage and/or injuries: _____

EDUCATION/TRAINING

Name & Location Major Course of Study Certification Acquired

High School _____

College _____

Business/Technical _____

Other (GED, CLEP, etc.) _____

Post Graduate _____

List your extra curricular activities and awards:

Employment Application (continued)

If applicable, please identify business office related experience including proficiency and types of equipment:

Data Entry

Software: list all that apply

Word Processing

Software: list all that apply

Words per
minute

Other Computer Software

Software & experience (list all that apply)

EMPLOYMENT HISTORY

Please give complete employment history starting from most recent employer including any part-time employment or military experience.

Dates	Weekly Salary	Company Name/Address/Telephone	Supervisor's Name	Reason for Termination

I give permission to Youth Advocate Programs, Inc. to contact any or all of the **former** employers listed above to verify the information provided.

Applicant's Signature

Date

Is your resume attached?

Yes

No

Employment Application (Continued)

CHARACTER REFERENCES

Please list five character references below. YAP, Inc. requires two personal references with someone that has a close relationship with you who can verify your community involvement and three professional references with someone who can provide insight into your character and work history.

	Name and Address (Include Zip Code)	Telephone Number (Include Area Code)	How Long Known?	Relationship to You
1				
2				
3				
4				
5				

Please write about your hobbies, interests, special skills, life experiences, volunteer experiences and career goals that you feel are assets in working with young people and their families.

Employment Application (Continued)

ADDITIONAL INFORMATION

Government regulations may require that an individual applying for employment at YAP, Inc. obtain a criminal background and/or child abuse clearance check. If the position you are applying for requires such clearances, the originals of such documents must be presented to YAP, Inc. prior to employment. The cost of these documents is borne by the applicant. The documents are only valid if dated less than one year prior to the date of the Provider Agreement.

Have you ever received any such clearances? Yes No

If yes, please list the type of clearance, the law enforcement or governmental agency/state that conducted the check and the date the report was validated:

Type	Agency/State	Date Validated
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please answer the following questions:

- Are you currently on probation or parole? Yes No
- Are there currently any criminal charges pending against you? Yes No
- Have you ever been convicted of a criminal offense? Yes No
- Have you ever forfeited bond or collateral in connection with a criminal charge? Yes No
- Have you ever been convicted of fraud? Yes No
- Have you ever been convicted of a narcotics offense? Yes No
- Have you ever been convicted of any other felony offense? Yes No
- Have you ever had an inappropriate sexual relationship with a minor? Yes No
- Have you ever been debarred; excluded or otherwise listed as ineligible for participation in a federal and/or state health care program? Yes No

If you answered yes to any of these questions, list offense(s), date(s) of conviction and disposition(s) below:

Employment Application (Continued)

With your consent, Youth Advocate Programs, Inc. may obtain criminal background checks on you from a consumer-reporting agency (CRA) at the time of your employment application and/or in the future. The Fair Credit Reporting Act (FCRA) requires that employers disclose a summary of your rights under the act in a separate document and obtain your authorization to conduct the background check. Enclosed with this application is a document entitled, "A Summary of Your Rights under the Fair Credit Reporting Act".

Did you receive a copy of "A Summary of Your Rights Under the Fair Credit Reporting Act"? Yes No

Do you authorize Youth Advocate Programs, Inc. to obtain criminal background checks on you at the time of your employment application and/or in the future? Yes No

Applicant's Signature

Date

Please note that your signature does not imply consent unless you have checked the boxes marked "Yes" above.

Applicants please note that a conviction is an adjudication of guilt, including a determination before a district justice or a criminal court, resulting in a legal penalty such as a fine, a sentence, or probation. Omit any offense committed before your 18th birthday unless it was not adjudicated in a juvenile court or under a youthful offender law. Conviction(s) of a criminal offense is not a bar to employment in all cases. Each case is considered on its own merits and in relation to applicable state law, performance standards established by contracting authorities, and agency policies. These laws, standards or policies may change from time to time without prior notice.

THE FOLLOWING SECTION APPLIES TO PENNSYLVANIA APPLICANTS ONLY

PA Act 33 requires that public and private human service agencies obtain a report of criminal history record information from the Pennsylvania State Police or a statement that no such record exists for prospective employees. The Act also requires that non-Pennsylvania residents applying for employment obtain an FBI criminal history record report. In addition, the Act requires that a report be obtained from the Pennsylvania Department of Public Welfare that verifies the existence or non-existence of a founded or indicated report of child abuse. The prospective employee must present the originals of these documents to the prospective employer prior to hire or employment. The costs of these documents are borne by the applicant. The documents are only valid if dated less than one year prior to the date of application for employment.

Have you applied for these clearances? Yes No

Have you received these clearances? Yes No

If yes, please indicate date(s) validated by State/Federal Agency below:

Child Line Report (CY-113) Date Validated:

PA State Police (SP4-164) Date Validated:

If applicable, FBI (FD-285) Date Validated:

Employment Application (Continued)

THE FOLLOWING SECTION APPLIES TO ALL APPLICANTS

Have you ever been employed by Youth Advocate Programs, Inc.? Yes No

If you answered yes, please list the dates and check the reason for termination:

From: _____ To: _____

Reason for Termination

- | | | |
|---|---|---|
| <input type="checkbox"/> Resignation | <input type="checkbox"/> Reduction in the workforce | <input type="checkbox"/> Extended absence |
| <input type="checkbox"/> Mutual Agreement | <input type="checkbox"/> Unsatisfactory Performance | <input type="checkbox"/> Gross Misconduct |

I attest that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for refusal to hire, or if hired, dismissal.

I authorize the Youth Advocate Programs, Inc. to contact persons or organizations referenced in this application for the purpose of providing any and all information concerning my previous employment, education or any other information they might have personal or otherwise regarding my suitability for employment. I release all such parties from all liability for any damages that may result from furnishing such information.

In consideration for my employment and my being considered for employment by Youth Advocate Programs, Inc., I agree to conform to these rules and regulations of the corporation and acknowledge that these rules and regulations may be changed, interpreted, withdrawn or added to at any time at the corporation's sole option and without any notice to me.

I further acknowledge that my employment may be terminated and any offer of employment, if such is made, may be withdrawn, with or without cause, and with or without prior notice, at any time, at the option of the Youth Advocate Programs, Inc. or myself.

Applicant's Signature

Date

YOUTH ADVOCATE PROGRAMS, INC.

P.O. Box 950, 2007 North Third Street
Harrisburg, Pennsylvania 17108 (717)
232-7580

A Summary of Your Rights under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W, Washington, DC 20552.**

● **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

● **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identity theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

● **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

● **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

● **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

● **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

● **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

● **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

● **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT. (1-888-567- 8688).

● **You may seek damages from violators.** If a consumer reporting agency, or in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

● **Identity theft victims and active military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact: TYPE OF BUSINESS:

1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.
- b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:

CONTACT:

- a. Consumer Financial Protection Bureau
1700 G Street NW
Washington, DC 20552
- b. Federal Trade Commission: Consumer Response Center – FCRA
Washington, DC 20580
(877) 382-4357