

Employment Application

A. Personal Information

							•	
LAST NAME	T NAME FIRST M		MIDDLE	DLE			HOME PHONE	
						()		
ADDRESS/P.O. BOX			APT, UF	P/DOWN,	FRON	T/REAR	CELL PHONE	
							()	
CITY		STATE	ZIPCOD	E	EM	AIL ADDR	ESS	
		<u> </u>			l .			
B. Employment Objective	<i>r</i> e							
POSITION (S) DESIRED						SALARY	REQUIREMENT	
1.								
2.						TYPE OF	EMPLOYMENT D	ESIRED
3.						☐ FULL	TIME	
3.						☐ PART	TIME	
			_					
C. Employment History	Accurately I	ist your previ	ious er	mployn	nent	beginn	ling with the	most recent employer first.
Include military service	e. Applicatio	ns without co	omplet	te infor	mati	on will	not be cons	idered.
•			•					
COMPANY				DATES O	F EMPI	LOYMENT	Γ	ENDING RATE OF PAY
				FROM:		TO:		
ADDRESS/P.O. BOX		CITY			STATE		ZIPCODE	PHONE
NAME AND TITLE OF CUREDING				DE464	o	5 1 5 4 1 // 1 1		()
NAME AND TITLE OF SUPERVISOR				REASO	ON FO	R LEAVIN	G	
JOB TITLE								
DESCRIPTION OF DUTIES								
COMPANY			Τ	DATES O	F EMPI	LOYMENT	T	ENDING RATE OF PAY
ADDRESS/P.O. BOX		CITY		FROM:	STATE	TO:	ZIPCODE	PHONE
N. S. N. L. S. S. N. S. S. N. S. S. N. S. S. N. S.							2 0002	, , ,
NAME AND TITLE OF SUPERVISOR				DEAC	ON FO	R LEAVIN	6	[()
INDIVIT MIND THEE OF SUPERVISOR				NEAS	ON FU	IN ELAVIN	G	
JOB TITLE								
JOB IIIEE								
COMPANY				DATES OF EMPLOYMENT ENDING RATE OF PAY				ENDING RATE OF PAY
COM AN				DATES OF LIVIT COTIVICINT				ENDING NATE OF FAT
				FROM: TO:				

ADDRESS/P.O. BOX		CITY		STATE	ZIPCODE	PHONE
NAME AND TITLE OF SUPERVISOR			RE/	ASON FOR LEAV	/ING	
JOB TITLE						
DESCRIPTION OF DUTIES						
DESCRIPTION OF BOTTES						
COMPANY			DATES	OF EMPLOYME	NT	ENDING RATE OF PAY
COMPAIN			DAILS	OI LIVIFLOTIVIL	-IN I	ENDING RATE OF FAT
ADDDESS/D O. DOV		CITY	FROM:			RUONE
ADDRESS/P.O. BOX		CITY		STATE	ZIPCODE	PHONE
						()
NAME AND TITLE OF SUPERVISOR			REA	ASON FOR LEAV	/ING	
JOB TITLE						
DESCRIPTION OF DUTIES						
, .,						
D. Education						
HIGH SCHOOL		DID YOU GR	ADUATE		IF N	IO, DID YOU OBTAIN YOUR G.E.D.
CITY	STATE	☐ YES HIGHEST YE		NO PLETED		YES NO
CITI	SIAIL					
COLLEGE NAME		DID YOU GR	3 [4	DEC	GREE
COLLEGE NAIVIE		DID YOU GR	ADUATE	<u> </u>	DEC	SKEE
CUTY	67.175	YES		NO		100
CITY	STATE	HIGHEST YE	AR COIVI	PLETED	MA	JOR
		☐ 1 ☐ 2				
GRADUATE COLLEGE OR OTHER (TRA	ADE,ETC.) NAME	DID YOU GR	ADUATE		DEC	GREE
		☐ YES		NO		
CITY	STATE	HIGHEST YE	AR COM	PLETED	MA	JOR
		□1 □2	□ 3 [_ 4		
LICENSES	TYPE	STATE ISSUE			DA	TE EXPIRES
E. Professional Refe	rences (Please n	rovide three)				
E. Troressionar Kere	irenees (irrease p	oride timee,				
NAME		PHONE			RELATIO	DNSHIP
NAME		PHONE			RELATIO	DNSHIP
NAME		PHONE			RELATIO	DNSHIP
		[()			1	

F. General Information

Are you eighteen (18) years of age or older? If not at least 21 years of age, can only be considered for non-driving positions due to restrictions on transporting clients with disabilities.	YES	□ NO
Have you lived in Ohio continuously for the last five (5) years? (Proof will be required upon hire)	YES	□ NO
Do you have a valid Ohio driver's license?	YES	□NO
Do you currently have two (2) or more moving violations on your driving record? (stop sign, traffic light, speeding, at-fault accident)	YES	□ NO
Do you have reliable transportation?	YES	□ NO
Are you able to lift at least fifty (50) pounds safely?	YES	□NO
Are you able to get down on your knees to perform CPR?	YES	□NO
If applicable for the position for which you are applying, are you available to work mornings, evenings, nights, split shifts, and/or weekends?	YES	□NO
If no, please explain:		
Have you ever been convicted of a criminal misdemeanor or felony? (Include sealed and expunged) (Criminal convictions are not always a bar to employment. However, UCP of Greater Cleveland complies fully with the guidelines of the Ohio Revised Code defining those crimes that bar employment.)	YES	□ NO
If yes, please provide details:		
Have you ever applied for a position or been employed by UCP of Greater Cleveland?	YES	□NO
If yes, what position and approximate date of application or employment:		
POSITION	ATES OF EMPLO	DYMENT/APPLICATION
F	ROM:	TO:
		OYMENT/APPLICATION
F	ROM:	TO:

G. Certification and agreement

Submitting this application online or by mail: If invited for an interview, the applicant will be requested to sign a statement certifying the accuracy of the information provided on this application as well as a statement outlining UCP of Greater Cleveland's application and employment policies. The applicant will also be asked to authorize the release of necessary information from past employment, criminal history and information from other consumer reporting agencies. Applications will remain active for three (3) months from the date of submission.

Email: humanresources@ucpcleveland.org Mail: UCP of Greater Cleveland

10011 Euclid Avenue Cleveland, OH 44106 Attn: Human Resources

"It is the policy of UCP of Greater Cleveland to provide equal opportunity employment to all employees and applicants for employment. No person shall be discriminated against in employment because of race, religion, color, sex, age, national origin, disability, military status, genetic information, or any other characteristic protected by applicable federal or state law. UCP of Greater Cleveland will provide reasonable accommodations for qualified individuals with disabilities."

UCP of Greater Cleveland

APPLICANT'S STATEMENT

Please read carefully before signing.

I certify that all of the information I have provided as part of my application for employment is true, accurate, and complete. I understand that any falsification, misrepresentation, or willful omission of facts shall be sufficient cause for the disqualification of this application or the termination of my employment. I understand that this application and the related records become the property of United Cerebral Palsy, which reserves the right to accept or reject my application. I further agree to observe all rules, regulations, and policies of United Cerebral Palsy now in force and effect or as they may change during my employment if I am employed by United Cerebral Palsy. I further understand and acknowledge that my employment is on an at-will basis and can be terminated with or without notice.

I hereby authorize a thorough investigation of my past employment and related activities. I agree to cooperate in such an investigation and release from all liability or responsibility all persons, agencies, educational organizations, corporations requesting or supplying such information. Such inquiries may relate to my work history, personal references, police record, motor vehicle record, global terrorist watch list and anything else which is likely to determine my acceptability for employment. I also agree to participate in an Ohio Bureau of Criminal Identification and Investigation (BCI) fingerprint criminal history check and understand that my employment may be terminated based on any revealed criminal history. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event I am hired and I understand that any offer of employment is contingent upon successful completion of a pre-employment drug and alcohol test and may include TB testing and a physical. I understand that a photograph will be taken for the personnel database. Any offer of employment is also contingent on timely producing all required Federal, State, County and Agency documentation.

Applicant's Signature	Date
Please Print Name	

I acknowledge that I understand this agreement and have signed it voluntarily and of my own free will.

H:\Applicants\Application Revised: 4/92 thru 3/13

UCP of Greater Cleveland

APPLICANT'S DISCLOSURE STATEMENT

United Cerebral Palsy of Greater Cleveland uses information gathered from outside agencies to make employment decisions. Information may be gathered from the Ohio Bureau of Criminal Identification & Investigation, the Ohio Bureau of Motor Vehicles, and other organizations that issue consumer reports.

If an adverse hiring decision is made as a result of any consumer report or employment is terminated because of it, the person will be given a copy of the report.

A rejected applicant or terminated employee who disputes the accuracy of the report has the following rights:

- 1. He or she will be given the name, address, and telephone number of the consumer reporting agency that provided the report;
- 2. He or she will be told that the consumer reporting agency did not make the employment decision and is not able to explain why it was made;
- 3. He or she is entitled to obtain from the consumer reporting agency a free disclosure or the contents of his or her file from the consumer reporting agency if requested within 60 days; and,
- 4. He or she may dispute the accuracy or completeness of the information provided by the consumer reporting agency.

This disclosure statement is intended to meet the requirements of the Fair Credit Reporting Act (FCRA).

Applicant's Signature	Date	
Please Print Name		

CRIMINAL BACKGROUND CHECKS:

UNITED CEREBRAL PALSY ASSOCIATION OF GREATER CLEVELAND, INC. (UCP) does a complete background check on every employee hired. Fingerprints are sent to the Bureau of Criminal Investigation and Identification (BCII), and the FBI if necessary.

We advise all employees before hiring that UCP will not employ anyone who has a felony in criminal activities such as drugs, sex, abuse and murder. There are other offenses that may also exclude employment at the discretion of management. The Ohio Department of Developmental Disabilities and the Cuyahoga County Board of Developmental Disabilities require that we are obligated to a more stringent standard with background checks. Because of this, while you are employed with UCP, it is your obligation and responsibility to inform the Human Resources Director, in writing, if you are formally charged with, convicted of, plead guilty to a felony or misdemeanor. You **must** make this report in writing as soon as possible, but no later than **fourteen (14)** calendar days of the **charge** and again when there is an **outcome**. Failure to follow this process will be cause for dismissal.

Ohio law prohibits County Boards of Developmental Disabilities and private providers from hiring persons who have been convicted of or plead guilty to the following offenses:

Tier 1 - Never

2903.01 (aggravated murder); 2903.02 (murder); 2903.03 (voluntary manslaughter); 2903.11 (felonious assault); 2903.15 (permitting child abuse); 2903.16 (failing to provide for a functionally impaired person); 2903.34 (patient abuse and neglect); 2903.341 (patient endangerment); 2905.01 (kidnapping); 2905.02 (abduction); 2905.32 (trafficking in persons); 2905.33 (unlawful conduct with respect to documents); 2907.02 (rape); 2907.03 (sexual battery); 2907.04 (unlawful sexual conduct with a minor, formerly corruption of a minor); 2907.05 (gross sexual imposition); 2907.06 (sexual imposition); 2907.07 (importuning):

2907.12 (Former - felonious sexual penetration);

2907.08 (voyeurism);

or school);

2907.31 (disseminating matter harmful to juveniles);

2907.32 (pandering obscenity);

2907.321 (pandering obscenity involving a minor);

2907.322 (pandering sexually oriented matter involving a minor);

2907.323 (illegal use of minor in nudity-oriented material or performance);

2909.22 (soliciting/providing support for act of terrorism);

2909.23 (making terrorist threat);

2909.24 (terrorism);

2913.40 (Medicaid fraud);

A conviction related to fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct involving a federal or state-funded program, excluding the disqualifying offenses set forth in section 2913.46 of the Revised Code (illegal use of supplemental nutrition assistance program or women, infants, and children program benefits)

2923.01 (conspiracy), 2923.02 (attempt), or 2923.03 (complicity) when the underlying offense is any of the offenses or violations described in this section of this rule;

Tier 2 - 10 Yr (since fully discharged from imprisonment, probation, and parole)

2903.04 (involuntary manslaughter);
2903.041 (reckless homicide);
2905.04 (child stealing as it existed prior to July 1, 1996);
2905.05 (criminal child enticement);
2905.11 (extortion);
2907.21 (compelling prostitution);
2907.22 (promoting prostitution);
2907.23 (procuring);
2909.02 (aggravated arson);
2909.03 (arson);
2911.01 (aggravated robbery);
2911.11 (aggravated burglary);
2923.12 (carrying concealed weapon);
2923.122 (illegal conveyance or possession of deadly weapon or
dangerous ordnance);
2923.123 (illegal conveyance of deadly weapon into courthouse);
2923.13 (having weapons while under disability);
2923.161 (improperly discharging a firearm at or into a habitation

2923.162 (discharge of firearm on or near prohibited premises);

2923.21 (improperly furnishing firearms to minor); 2923.32 (engaging in pattern of corrupt activity);

2913.46 (illegal used of food stamps or women, infants, and children program benefits); 2913.48 (workers' compensation fraud);

2012 40 (identity froud):

2913.49 (identity fraud);

2917.02 (aggravated riot);

2921.36 (illegal conveyance of weapons, drugs, or other prohibited items onto grounds of detention facility or institution);

2923.01 (conspiracy), 2923.02 (attempt), or 2923.03 (complicity) when the underlying offense is any of the offenses or violations described in this section of this rule;

Initial Date

See reverse side or second page for additional offenses

Tier 2 - 10 Yr (since fully discharged from imprisonment, probation, and parole)

2923.42 (participating in criminal gang); 2925.04 (illegal manufacture of drugs or cultivation of marijuana); 2925.02 (corrupting another with drugs); 2925.03 (trafficking in drugs); 3716.11 (placing harmful objects in food or confection);

Tier 3 - 7 Yr (since fully discharged from imprisonment, probation, and parole)

959.13 (cruelty to animals); 2921.03 (intimidation); 959.131 (prohibitions concerning companion animals); 2921.11 (perjury); 2903.12 (aggravated assault); 2921.13 (falsification in theft offense to purchase firearm); 2921.34 (escape); 2903.21 (aggravated menacing); 2903.211 (menacing by stalking); 2921.35 (aiding escape or resistance to lawful authority); 2905.12 (coercion); 2925.05 (funding of drug or marijuana trafficking); 2909.04 (disrupting public services); 2925.06 (illegal administration or distribution of anabolic 2911.02 (robbery); 2911.12 (burglary); 2925.24 (tampering with drugs); 2927.12 (ethnic intimidation); 2913.47 (insurance fraud); 2917.01 (inciting to violence); 2917.03 (riot); 2923.01 (conspiracy), 2923.02 (attempt), or 2923.03 (complicity) 2917.31 (inducing panic); when the underlying offense is any of the offenses or violations 2919.22 (endangering children); described in this section of this rule 2919.25 (domestic violence);

Tier 4 - 5 Yr (since fully discharged from imprisonment, probation, and parole)

2903.13 (assault);	2919.12 (unlawful abortion);
2903.22 (menacing);	2919.121 (unlawful abortion upon minor);
2907.09 (public indecency);	2919.123 (unlawful distribution of an abortion-inducing drug);
2907.24 (soliciting after positive human immunodeficiency virus	2919.23 (interference with custody);
test);	2919.24 (contributing to unruliness or delinquency of child);
2907.25 (prostitution);	2921.12 (tampering with evidence);
2907.33 (deception to obtain matter harmless to juveniles);	2921.24 (disclosure of confidential information);
2911.13 (breaking and entering);	2921.32 (obstructing justice);
2913.02 (theft);	2921.321 (assaulting/harassing police dog or horse/service
2913.03 (unauthorized use of a vehicle);	animal);
2913.04 (unauthorized use of property, computer, cable, or	2921.51 (impersonation of peace officer);
telecommunication property);	2925.09 (unapproved drugs);
2913.05 (telecommunications fraud);	2925.11 (possession of drugs);
2913.11 (passing bad checks);	2925.13 (permitting drug abuse);
2913.21 (misuse of credit cards);	2925.22 (deception to obtain dangerous drugs);
2913.31 (forging identification cards);	2925.23 (illegal processing of drug documents);
2913.32 (criminal simulation);	2925.36 (tampering with drugs);
2913.41 (defrauding a rental agency or hostelry);	2925.55 (unlawful purchase of pseudoephedrine product);
2913.42 (tampering with records);	2925.56 (unlawful sale of pseudoephedrine product);
2913.43 (securing writings by deception);	
2913.44 (personating an officer);	2923.01 (conspiracy), 2923.02 (attempt), or 2923.03 (complicity)
2913.441 (unlawful display of law enforcement emblem);	when the underlying offense is any of the offenses or violations
2913.45 (defrauding creditors);	described in this section of this rule
2913.51 (receiving stolen property);	

Potential Additional Disqualifying Offenses:

- A felony contained in the Revised Code that is not listed above, if the felony bears a direct and substantial relationship to the duties
 and responsibilities of the position being filled.
- Any offense contained in the Ohio 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.
- A violation of an existing or former municipal ordinance or law of this state, any other state, or the United States that is substantially
 equivalent to any of the offenses listed above.

Print Name	
Sign Name	Date