



A SMALL MIRACLE, INC.

Comprehensive Services for Children and Adults
with Autism and Other Special Needs

EMPLOYMENT APPLICATION

A Small Miracle, Inc., is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief or disability.

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

When returning the completed application to the office of A Small Miracle, Inc., please include a copy of the following: Driver's license, Social Security card, Current TB tine, High School diploma or GED, Current car registration and Current proof of car insurance.

These items are required by Medicaid. Thank you in advance.

Personal Data

_____	_____	_____
First Name	Middle/Maiden	Last
_____	_____	_____
Street Address	City	State Zip Code
_____	_____	_____
Home Telephone Number	Social Security Number	Today's Date

Position Desired: Habilitation Technician, QP, Office Staff (Circle One)

_____	_____
Telephone Number at which we may contact you	Email address

Are you 18 years of age or older? Yes _____ No _____

Have you ever been convicted of a crime? Yes _____ No _____

If "yes", please explain:

1890 Tommy's Rd. • Goldsboro, NC 27534 • 919.751.9089 • 800.760.0665

2110 Ft. Bragg Rd. • Ste. 108 • Fayetteville, NC 28303 • 910.672.0272

7404 Chapel Hill Rd. • Unit K • Raleigh, NC 27607 • 919.854.4400

2843 Daisy Lane • Suite A • Wilson, NC 27896 • 252.206.1002

2406 S. Charles Blvd • Greenville, NC 27858 • 252.439.0431

Availability

Schedule desired: Full Time _____ Part Time _____ Seasonal _____ Fill In _____

What date could you start work? _____

Area you would prefer to work _____

of miles you are willing to travel to work _____

	MON	TUES	WED	THURS	FRI	SAT	SUN
HRS AVAILABLE							

Education- High School/College

High School/ College	City/State	Graduation Date	Major	Degree

Employment History

List your current or most recent employment first. Include work related internships, military and volunteer work. Continue on the back of this page if necessary.

Employer	Address/Telephone	Position	Rate of pay	Dates of Employment	May we contact?
Current			\$ _____ HR Week Month (circle)	From _____ To _____	Yes/ No
Reason for Leaving:					
Previous			\$ _____ HR Week Month (circle)	From _____ To _____	Yes/ No
Reason for Leaving:					
Previous			\$ _____ HR Week Month (circle)	From _____ To _____	Yes/ No
Reason for Leaving:					

Other Related Experience

List any work related internships, volunteer work (paid or un-paid), your own personal or family experience, or babysitting.

Employer / Experience / Volunteer Position	Address/Telephone	Position	Rate of pay	Duration of Experience	May we contact?
			\$ _____ HR Week Month (circle)	From _____ To _____	Yes/ No
Reason for Leaving:					
			\$ _____ HR Week Month (circle)	From _____ To _____	Yes/ No
Reason for Leaving:					
			\$ _____ HR Week Month (circle)	From _____ To _____	Yes/ No
Reason for Leaving:					

Consumer Reports Release

I have the right to make a request of TIS, upon proper identification and the payment of any authorized fees, the information in its files on me, at the time of my request.

I further authorize ongoing procurement of the above-mentioned reports at any time during my employment (or contract).

Print Full Name (First, middle, last) _____

Street Address _____

City _____ St. _____ ZIP _____

County _____

Drivers License State _____ License Number _____

For Identification Purposes

Date of Birth: Month/Day/Year _____ Race _____ Gender _____

Other or former names (maiden) _____

Professional License: State _____ Type (ex. CNAI) _____ Number _____

Previous Address _____

Have you lived in North Carolina for the past 5 years? _____

If no, please list the states you have resided in during the past five years. _____

Releases and Applicant's Signature

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from A Small Miracle, Inc. and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

Applicant Initials _____

All hiring and employment at A Small Miracle, Inc., is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by A Small Miracle, Inc., has no specific term and may be terminated by the employee or A Small Miracle, Inc., with or without notice. I acknowledge that A Small Miracle, Inc., has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide a copy of my high school diploma or GED, proof of TB skin testing, a current driver's license and other pertinent documentation, if I am offered a position with A Small Miracle, Inc., and that failure to provide this evidence will result in the termination of my employment.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States if I am offered a position with A Small Miracle, Inc., and that failure to provide this evidence will result in the termination of my employment.

I hereby authorize without reservation, any party or agency contacted by this employer to furnish the above-mentioned information

I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to A Small Miracle, Inc. I agree to release and hold harmless A Small Miracle, Inc., from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with A Small Miracle, Inc., may be terminated.

Applicant's Signature

Date

Interviewer Signature

Date

Comments:

