

**BAY AREA TURNING POINT, INC.**  
P.O. BOX 890929, HOUSTON, TX 77289  
OFFICE (281) 338-7600 24 HOUR HOTLINE (281) 286-2525

**APPLICATION FOR EMPLOYMENT**

Date:

Applicant Name:

Present Address:  
Permanent Address (If different from present address):

|                                                                           |  |
|---------------------------------------------------------------------------|--|
| Telephone:      Social Security No.:<br>Best time to contact you at home: |  |
|---------------------------------------------------------------------------|--|

Emergency Contact: Name:      Telephone:

Relationship:

Are you either a U.S. citizen or an alien authorized to work in the U.S.?     Yes     No  
*Proof of citizenship or immigration will be required upon employment*

**If you have received services of any type from Bay Area Turning Point within the last 12 months or are currently receiving services we cannot accept your application for employment at this time.**

**POSITION DESIRED**

|                                                                                                                                                            |                     |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------|
| <b>Position:</b><br>Are you available to work:<br><input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary | Date you can start: | Salary desired: |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------|

Have you previously worked for B ATP? If so, from      to      .  
If not, have you ever filed an application with B ATP before?  
If yes, what position did you hold?  
If yes, what was your reason for leaving:

Do any of your friends or relatives work now, or in the past, at B ATP?      If yes, who and what is their relationship to you?

How did you learn about this opening?  
Are you currently employed?  
May we contact your present employer?  
Are you currently on "lay-off" status and subject to recall?  
Can you travel if a job requires it?

**EDUCATION**

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|              |                                                                        |                  |
|--------------|------------------------------------------------------------------------|------------------|
| High School: | Graduated? Yes<br><input type="checkbox"/> No <input type="checkbox"/> | Course of Study: |
|--------------|------------------------------------------------------------------------|------------------|

|                     |                                                                        |                  |
|---------------------|------------------------------------------------------------------------|------------------|
| College/University: | Graduated? Yes<br><input type="checkbox"/> No <input type="checkbox"/> | Course of Study: |
|---------------------|------------------------------------------------------------------------|------------------|

|                      |                                                                        |                  |
|----------------------|------------------------------------------------------------------------|------------------|
| Postgraduate School: | Graduated? Yes<br><input type="checkbox"/> No <input type="checkbox"/> | Course of Study: |
|----------------------|------------------------------------------------------------------------|------------------|

Other education or training:

Please rate your computer skills from 1-5, with 5 being proficient:    PC or MAC    Other special skills:

Please list any professional organizations to which you belong:

**MILITARY EXPERIENCE**

|                    |               |                    |
|--------------------|---------------|--------------------|
| Branch of Service: | Dates Served: | Rank at Discharge: |
|--------------------|---------------|--------------------|

Education and Training:

**WORK EXPERIENCE**

Please list previous 10 years of employment, beginning with the most recent. If you need more room, you may attach another sheet of paper.

|           |          |
|-----------|----------|
| Employer: | Address: |
|-----------|----------|

|            |                |                     |
|------------|----------------|---------------------|
| From    to | Position Held: | Reason for leaving: |
|------------|----------------|---------------------|

|                          |                                                                             |
|--------------------------|-----------------------------------------------------------------------------|
| Superior's Name & Title: | May we contact? Yes<br><input type="checkbox"/> No <input type="checkbox"/> |
|--------------------------|-----------------------------------------------------------------------------|

Description of Duties:

|                  |               |
|------------------|---------------|
| Starting Salary: | Final Salary: |
|------------------|---------------|

|           |          |
|-----------|----------|
| Employer: | Address: |
|-----------|----------|

|            |                |                     |
|------------|----------------|---------------------|
| From    to | Position Held: | Reason for leaving: |
|------------|----------------|---------------------|

|                          |                                                                             |
|--------------------------|-----------------------------------------------------------------------------|
| Superior's Name & Title: | May we contact? Yes<br><input type="checkbox"/> No <input type="checkbox"/> |
|--------------------------|-----------------------------------------------------------------------------|

Description of Duties:



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**AUTHORIZATION AND ACKNOWLEDGMENTS**

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal.

I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you.

I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_