



Strengthening & Equipping Neighborhoods Together

APPLICATION FOR EMPLOYMENT

SENT mission is to intentionally walk with neighbors through loving relationships and strategic development to accomplish holistic transformation of neighborhoods in Shawnee County.

PLEASE PRINT CLEARLY OR TYPE.

Complete the entire application. We encourage you to attach a resume. Please fill out each section fully (Writing "See Resume" is not accepted). Applications with missing or invalid job numbers will not be considered for employment.

GENERAL INFORMATION

Name: (First) (MI) (Last) Other Names Used (maiden, former, etc.):
Street Address: City, State & Zip:
Main Phone: Mobile Phone: Other Phone:
Are you eligible to work in the United States?
Are you 16 years of age or older?
Are you currently employed by SENT, Inc.?
Have you ever been employed by SENT, Inc.?
Are you related to any current SENT, Inc. employee(s)?

How did you learn about this employment opportunity? (check all that apply)

Job Bulletin (Posting) Walk-in SENT Website Church Bulletin / Posting
Social Media Referral by friend or employee (Name:) Other:

Position applying for: Acceptable salary range: Full time Part time Temporary
Date available to start:

Availability: Monday: from to
Tuesday: from to
Wednesday: from to
Thursday: from to
Friday: from to
Weekends will be involved on occasion for special events, promotions, fundraisers, etc. Explain your weekend availability:
Tentative Dates and Times (to be approved by SENT Board):
Launch After School Program hours during the school year: 3:30 to 6:30 / Days: TBD
Launch Summer program hours: Tuesday, Wednesday, Thursday from 11am - 3:30pm (June 11 and July 2)

EDUCATION

Name of School	City / State	Did you graduate?	If No, # of years left to graduate	If Yes, date Graduated	Degree received
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other School:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other credentials, licenses, professional affiliations which are relevant to the job for which you are applying.					

SKILLS & TRAINING *(Applicable to position)*

Please list technical, clerical, trade, skills that are relevant to this position. Include relevant computer systems and software which you have a working knowledge. Include CPR, Lifeguard Training, and first Aid. Note your level of proficiency and/or expiration dates. Include marketing abilities, languages, certifications.

TYPE	LEVEL OF PROFICIENCY	EXPIRATION DATE



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WORK EXPERIENCE

Please detail your work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position *separately*. Attach additional sheets if necessary. Please explain any gaps in employment. Include full-time military or volunteer commitments.

PLEASE DO NOT complete this information with the notation "See Resume."

Organization Name (most recent employer) & Dates of Employment:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Starting Salary: _____ Final Salary: _____
Title(s):	Supervisor's Name & Contact Number:	
Primary duties:	Reason for Leaving:	

Organization Name (most recent employer) & Dates of Employment:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Starting Salary: _____ Final Salary: _____
Title(s):	Supervisor's Name & Contact Number:	
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OTHER

Is there any reason that would prevent you from performing the essential functions of the position for which you are applying?

Yes No

Explain:

Is there any other information you feel the SENT, Inc. should know about you?

Explain:

Why are you interested in this position?

Explain:

PROFESSIONAL REFERENCES

Name	Email Address	Phone	Business Name and Position	Time Known

PERSONAL REFERENCES

Name	Email Address	Phone	Business Name and Position	Time Known

BACKGROUND INFORMATION

Authorization for Release of Information

I hereby request and authorize a criminal multi-state background check & offender registry search to furnish the SENT, Inc. with criminal history record information as described in K.S.A. 22-4701 (b). I voluntarily waive all rights of recourse and release the SENT, Inc. and Research Information Services from liability for compliance with this authorization.

Full Name _____
Last
First
Middle

Current address _____
Street
City
State
Zip

Date of Birth _____ Social Security Number _____

Applicant Signature: _____ **Date:** _____

In a good faith effort by the SENT, Inc., to ensure a healthy and safe environment for our youth activities and programs so the SENT, Inc. may comply with K.S.A. 65-516, which prohibits us from employing certain persons in a facility that cares for children, please answer the following questions.

HAVE YOU EVER:

1. Plead guilty or been convicted of a criminal offense?

Yes No If yes, give dates _____ and circumstances _____.

2. Had a felony conviction under the controlled substance act:

Yes No If yes, give dates _____ State and County of court action _____.

3. Had a misdemeanor or felony conviction of a crime against persons, a sexual offense, a crime affecting family relationships or children?

Yes No If yes, give dates _____

4. Been adjudicated (found or determined in a court of law to be) a juvenile offender, delinquent, or miscreant because of having committed an act which, if committed by an adult, would be a felony?

Yes No If yes, give dates _____

5. Committed physical, mental, sexual, or emotional abuse or neglect as validated by SRS?

Yes No If yes, give dates _____

6. Had a child declared, in a court of law, to be deprived or in need of care based on allegation of physical, mental, or emotional abuse?

Yes No If yes, give dates _____

7. Had parental rights terminated?

Yes No If yes, give dates _____

PLEASE READ CAREFULLY & INITIAL EACH LINE THAT YOU UNDERSTAND & ACCEPT THIS INFORMATION.

- I certify that the information on this application and its supporting documents is accurate and complete.
- I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date.
- I authorize SENT, Inc. to investigate, without liability, all statements contained in this application and supporting materials.
- I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment.
- I agree to submit to a criminal and credit background investigation.
- I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that employees of SENT, Inc. serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law.
- If employed, I will be required to furnish proof of eligibility to work in the United States and to comply with company and departmental regulations.
- I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off.
- I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice.
- I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

Applicant Signature: _____ **Date:** _____