



# Moves & Grooves Employment Application



**Visit our website!**  
[www.movesandgrooves.org](http://www.movesandgrooves.org)

## Personal Data (Please print Clearly)

Name (Last, First, Middle) \_\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_  
 Number/Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ May we call you at work? Y N

Email Address \_\_\_\_\_ Are you legally eligible to work in the U.S.? Y N  
 (Proof of work authorization will be required.)

Do you have a valid driver's license? Y N License # \_\_\_\_\_ Issuing State \_\_\_\_\_

Position Desired \_\_\_\_\_ Full-time Part-time Intern Volunteer

Location Desired \_\_\_\_\_ Date available to start \_\_\_\_\_ Salary requirements \_\_\_\_\_

Have you ever been employed by Moves and Grooves? Y N

Do you have any relatives who are employed at Moves and Grooves? Y N

If yes, give name (s) \_\_\_\_\_

**Read Carefully.** Are you able to perform the essential functions of a Moves and Grooves employee such as complying with Moves and Grooves' policies and procedures, rendering competent quality care to clients, with or without accommodations? Y N

If no, please describe the functions that cannot be performed.  
 \_\_\_\_\_

## Additional Information

In answering the following questions, include offenses or charges to which a guilty or nolo contendere plea was entered or, if convicted, a sentence of probation was imposed.

Have you been convicted of, pled guilty to, and/or pled nolo contendere to a crime (felony or misdemeanor, including but not limited to child molestation, theft, banking fraud, drug and/or alcohol-related offenses, assault, etc.)? Yes No (circle one)

**Additional Information (continued)**

Have you ever been convicted of a violation of the law or forfeited collateral posted as a bond?

- Yes
- No

Are you now facing charges for any offense against the law?

- Yes
- No

Have you been convicted of speeding or any other moving violation within the last 36 months?

- Yes
- No

(If you are not sure you have violations that fall within the past 36 months, please note so at the bottom of this page, rather than responding “No.” Ability to be insured by Moves and Grooves’ insurance carrier is a requirement for most positions.)

Are you presently using illegal drugs?

- Yes
- No

**The fact that you are awaiting trial or have a record of conviction will not necessarily bar you from employment, but will be considered in the context of the entire application and the position applied for.**

If you answered “Yes” to any of the above questions, please explain.

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**Employment Experience**

Please list all employers during the past five years, starting with the most recent.

Name & address of employer (Include street, city, state & zip code)	Nature of Work	Salary	Reason for leaving	Dates (mm/yy)	
				From	To
Immediate Supervisor		Phone #			
Immediate Supervisor		Phone #			
Immediate Supervisor		Phone #			
Immediate Supervisor		Phone #			

## Military Experience

Branch of service \_\_\_\_\_ Grade or rank at discharge \_\_\_\_\_

Occupational specialization \_\_\_\_\_

Special technical training and relevant skills acquired \_\_\_\_\_

\_\_\_\_\_

Please include names & addresses of related military schools/academies. \_\_\_\_\_

\_\_\_\_\_

## Education

Have you earned your high school diploma or earned a GED?

- Yes
- No

List all Secondary Educational Schools	years completed	degree earned	field or major	grade point average
		<input type="radio"/> Yes <input type="radio"/> No		
		<input type="radio"/> Yes <input type="radio"/> No		
		<input type="radio"/> Yes <input type="radio"/> No		
		<input type="radio"/> Yes <input type="radio"/> No		

## Activities & Skills

School, campus, professional and/or community service. Include any office held. If you wish, you may omit any organization with a name that indicates the race, sex, color, religion, disability or national origin of its members.

\_\_\_\_\_

\_\_\_\_\_

List any special training, skills or experience you would like considered, relative to the position for which you are applying.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Licensing History

Please answer the following questions regarding malpractice history.

Have you ever been named in any malpractice action?

- Yes
- No

If the answer to the above question is “Yes” **please attach the following information for each** suit or settlement whether open or closed, regardless of whether or not payment was made:

- A complete copy of the complaint filed stating the allegations and an explanation of the current status of the action.
- If the actions have been settled or dismissed, Moves and Grooves will need a copy of the settlement or dismissal. If actions were settled, Moves and Grooves needs to know which party accepted liability for the action(s).
- A claims history report from the insurer covering the claim.

Has there ever been any action against or investigation relating to your:

- a. License
  - Yes
  - No
  
- b. Privileges
  - Yes
  - No

If you answered “Yes” to either of the above questions, please explain. \_\_\_\_\_

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## References

List three people who aren't already mentioned in the Employment section. Please indicate at least one reference you have known for a duration of five years or more.

Name	Address	Phone #	Occupation	Years Known

**As an applicant, you agree to and understand the following:**

Please read carefully and **initial each section.**

\_\_\_\_\_ I hereby certify that I have not withheld any information that might adversely affect my chances for employment and that the answers given by me are true, correct, and complete to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before or after discovery.

\_\_\_\_\_ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigations or disclosures.

\_\_\_\_\_ I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Director of Human Resources or designated authority persons.

**Signature of Applicant**

\_\_\_\_\_

First

Middle

Last

Date \_\_\_\_\_

After 90 days from the date of this application. Applicant must reapply.



**An Equal Opportunity Employer**

Moves and Grooves does not discriminate against any individual because of race, sex, color, religion, national origin, age, physical disability or status as disabled veteran or Vietnam-era veteran.