

## **Mission Statement**

To promote economic and social advancement of farmworkers, Hispanics and disadvantaged individuals through the provision of education, training, advocacy and services that enhance self-sufficiency.

## Application for Employment

It is the policy of the Board of Directors of OHDC that the administration of OHDC programs will be free from intentional or inadvertent discrimination because of race, religion, color, national origin, sex, age, sexual orientation, marital status, disability, political affiliation or beliefs, or other similarly protected classes.

**Please complete all portions of the application.  
Incomplete applications will not be accepted.**

Name (Last, First, Middle):	Former Name:	Today's Date:
Address:		Social Security Number:
City, State, Zip:	Phone: (    )	Email address:
Position you are applying for?	In which location?	
Rate of pay expected?	Date available for work?	
Are you willing to relocate?  <input type="radio"/> Yes <input type="radio"/> No	Are you legally eligible for employment in this country?  <input type="radio"/> Yes <input type="radio"/> No	
Would you work: <input type="radio"/> Full Time <input type="radio"/> Part Time (times preferred) _____ <input type="radio"/> Temporary (3 months or less)		
Have you applied for a position with OHDC within the past year? <input type="radio"/> Yes <input type="radio"/> No                      If yes, please note position and date applied: _____		
Have you previously been employed by OHDC? <input type="radio"/> Yes <input type="radio"/> No                      If yes, please note position and location employed: _____		
Please note what languages you speak and write fluently. <input type="radio"/> English (oral) <input type="radio"/> English (written) <input type="radio"/> Spanish (oral) <input type="radio"/> Spanish (written) <input type="radio"/> Other _____		
List any criminal convictions during the past seven years (List specific offenses and dates).  _____ _____		

**MOST POSITIONS AT OHDC REQUIRE DRIVING A VEHICLE**

Do you have reliable, insured transportation?  <input type="radio"/> Yes <input type="radio"/> No	If no, would you be able to provide reliable, insured transportation if you were required to drive on the job? <input type="radio"/> Yes <input type="radio"/> No
If no, please explain:  _____ _____	

**EDUCATION AND TRAINING HISTORY.**

Name of School/ Location	Course of Study	Did you Graduate?	Degree
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**EMPLOYMENT HISTORY. LIST MOST RECENT EMPLOYER FIRST.**

Employer	Position Held	Salary	Hire Date
Address	Supervisor's Name and Phone Number	May we contact this employer?	Last Day Worked
Responsibilities			
_____			
_____			

Employer	Position Held	Salary	Hire Date
Address	Supervisor's Name and Phone Number	May we contact this employer?	Last Day Worked
Responsibilities			
_____			
_____			

Employer	Position Held	Salary	Hire Date
Address	Supervisor's Name and Phone Number	May we contact this employer?	Last Day Worked
Responsibilities			
_____			
_____			

Employer	Position Held	Salary	Hire Date
Address	Supervisor's Name and Phone Number	May we contact this employer?	Last Day Worked
Responsibilities			
_____			
_____			

**ADDITIONAL INFORMATION**

Please list any of your experiences, skills, or qualifications that relate to this position with Oregon Human Development Corporation.

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List all community, business or professional organizations you belong to and positions held (omit any information which would reveal protected class):

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**PROFESSIONAL REFERENCES**

List the names, addresses, and business phone numbers of three people by whom you have been supervised or who know your professional qualifications:

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PLEASE READ BEFORE SIGNING

I understand that Oregon Human Development Corporation (OHDC) will rely on the information I have provided in this application and during my interview. I certify that I have had sufficient time to carefully fill out this application and the answers given herein are true and complete to the best of my knowledge and that my application does not contain any errors, omissions, misrepresentations, or any information that could be interpreted as misleading. I understand that any error, misrepresentation, omission, or misleading information in my application or interview(s) may be grounds for termination of employment. I understand that the above information may be investigated by OHDC, and I authorize the employers, school, or persons named above to release to OHDC all information regarding my employment, character, and qualifications, and agree to hold all persons harmless with respect to the information they may give, receive or publish.

I understand that nothing contained in this employment application creates a contract between OHDC and myself for employment or any other benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding on OHDC. If an employment relationship is established, I understand that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at either the option of either the company or myself in accordance with OHDC's Personnel Procedures and Policies. I further understand that no representative of OHDC, other than the Board of Directors, has any authorization to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. I also understand that I am required to abide by all policies of OHDC.

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Signature

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Date

## Optional Application Supplement

### EEOC Data

OHDC, in accordance with Title 41 Code of Federal Regulations Chapter 60-1.40, and 60-2.21 (b)(4), invites all applicants or employees to complete the following information below. The information obtained will be treated in a confidential manner and will be used to assist fulfilling the OHDC's federal and state statistical reporting and Equal Opportunity/ Affirmative Action requirements. This information is voluntary and refusal to provide this information will not subject you to any adverse treatment. Thank you for your consideration and assistance.

**Gender**    Male    Female

**Ethnicity**    White    Black    Hispanic    Asian/ Pacific Islander    American Indian/ Alaskan Native

**Military**    Retired    Active Reserve    Inactive Reserve    Vietnam Era Veteran  
 Special Disabled Veteran

**Citizenship**    Native    Naturalized    Alien Permanent    Alien Temporary

**Disabled**    Yes    No

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### Where did you hear about this position?

#### Paper Publications

- The Oregonian
- El Hispanic News
- El Latino de Hoy
- Woodburn Independent
- Salem Statesman Journal
- Klamath Falls Herald and News
- Hillsboro Argus
- Ontario Daily
- Medford Mail Tribune
- Get Accessed/Hispanic Access Center

#### Other

- Friend
- Relative
- Client
- Walk-In
- OHDC Employee
- Oregon Employment Department (note which city)

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- OHDC Website
- America's Job Bank (www.ajb.org)
- Other Website (note which address)

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- Radio
- Television/ Cable