

NCC SOLUTIONS, INC.

EMPLOYMENT APPLICATION

NCC SOLUTIONS, INC. 13405 YORK RD. NORTH ROYALTON, OHIO 44133

PHONE: (440) 582-3300

FAX: (440) 582-1980

EMAIL: HRDEPT@NECARE.ORG

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, sexual orientation, age, national origin, ancestry, disability, genetic information, marital or veteran status. You must be 18 years of age and have a High School Diploma or GED to be employed.

Date: _____

Last Name: _____ First Name: _____ Middle Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____

Email Address (optional): _____

Position Direct Support Professional House Supervisor Manager Nurse

Applied For: Other _____ Qualified Intellectual Disability Professional (QIDP)

If you were referred by a current or past employee please indicate who: _____

How did you Banner Outside Building College Posting Community Posting

hear about Facebook Family Member Friend Job Fair (specify): _____

Internet RTA Ad _____

Have you filled an application with NCC Solutions, Inc. before? Yes No

Have you been employed with us before? Yes No If yes when? _____

On what date would you be available for work? _____

Are you authorized to work in the U.S. (You will be required to provide documentation.) Yes No

Are you available to work? Full Time Part time On-Call

Have you ever been convicted of a felony or misdemeanor? Yes No

If yes, please describe conditions: _____

Felony Misdemeanor Please specify the code number if known: _____

Convictions will not necessarily disqualify an applicant from employment.

EDUCATION

School Name and Location	Graduated	Major	Diploma/Degree
High School _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
College _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Post-College _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Other Training _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

Please list hobbies, skills, foreign languages, qualifications, or experiences

List Professional, trade, business or civic activities and offices held.

You may exclude membership that would reveal gender, race, sexual orientation, religion, national origin, age, ancestry, disability, or other protected status.

NCC Solutions, Inc. operates several units. Please check if you have a preference for location:

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Bedford | <input type="checkbox"/> Garfield Heights | <input type="checkbox"/> Parma |
| <input type="checkbox"/> Berea | <input type="checkbox"/> Lakewood | <input type="checkbox"/> Seven Hills |
| <input type="checkbox"/> Cleveland East Side | <input type="checkbox"/> Middleburg Heights | <input type="checkbox"/> Strongsville |
| <input type="checkbox"/> Cleveland West Side | <input type="checkbox"/> North Royalton | |
| <input type="checkbox"/> Fairview Park | <input type="checkbox"/> Olmsted Falls | |

EMPLOYMENT HISTORY *Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.*

1. Company Name _____
Address _____ Telephone _____
Date Started _____ Starting Wage _____ Starting Position _____
Date Ended _____ Ending Wage _____ Ending Position _____
Name of Supervisor _____
Responsibilities _____
Reason for leaving _____

2. Company Name _____
Address _____ Telephone _____
Date Started _____ Starting Wage _____ Starting Position _____
Date Ended _____ Ending Wage _____ Ending Position _____
Name of Supervisor _____
Responsibilities _____
Reason for leaving _____

3. Company Name _____
Address _____ Telephone _____
Date Started _____ Starting Wage _____ Starting Position _____
Date Ended _____ Ending Wage _____ Ending Position _____
Name of Supervisor _____
Responsibilities _____
Reason for leaving _____

4. Company Name _____
Address _____ Telephone _____
Date Started _____ Starting Wage _____ Starting Position _____
Date Ended _____ Ending Wage _____ Ending Position _____
Name of Supervisor _____
Responsibilities _____
Reason for leaving _____

5. Company Name _____
Address _____ Telephone _____
Date Started _____ Starting Wage _____ Starting Position _____
Date Ended _____ Ending Wage _____ Ending Position _____
Name of Supervisor _____
Responsibilities _____
Reason for leaving _____

NCC SOLUTIONS, INC. JOB APPLICATION QUESTIONNAIRE

1. To what population does NCC Solutions, Inc. provide services?

2. Why do you want to work for NCC Solutions, Inc.?

3. Explain any days/times you cannot work:

4. Are you going to be able to perform the essential duties of the job for which you are applying with or without a reasonable accommodation? Yes No

5. Are you able to work weekends and holidays?

Yes No

Comments:

6. Do you have reliable transportation or a means to get to work for any scheduled shifts you may receive at the unit for which you are hired?

Yes No Bus line

If no, would you be willing to accept shifts at another location if NCC Solutions, Inc. provided transportation from a satellite pick up site? Yes No

7. If your last supervisor was contacted, what would he or she say were your:

Strengths:

Areas needing attention:

8. What is your most important area that you would like to improve in yourself?

9. What do you believe is your most important work (or academic if you haven't worked) accomplishment as of today?

10. Have you ever been disciplined or terminated? If so, explain:

11. What are your occupational goals over the next 5 years?

ADDITIONAL INFORMATION

References (Please indicate whether reference is work related or personal)

1.	Name _____	<input type="checkbox"/> Work
	Address _____ Telephone _____	<input type="checkbox"/> Personal
2.	Name _____	<input type="checkbox"/> Work
	Address _____ Telephone _____	<input type="checkbox"/> Personal
3.	Name _____	<input type="checkbox"/> Work
	Address _____ Telephone _____	<input type="checkbox"/> Personal
4.	Name _____	<input type="checkbox"/> Work
	Address _____ Telephone _____	<input type="checkbox"/> Personal
5.	Name _____	<input type="checkbox"/> Work
	Address _____ Telephone _____	<input type="checkbox"/> Personal

I certify that answers given here are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of 6 months, but not to exceed 1 year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules of the employer.

Signature:

Date:

Applicants completing this form electronically will be required to sign a printed copy of this application as a condition of employment.

Applicants completing and signing this application will be considered for employment, but this application is not to be considered an offer of employment.

NOTICE AND AUTHORIZATION

This notice is supplied in accordance with your rights under the Fair Credit Reporting Act ("FCRA"). A summary of these rights are attached hereto and are also available on the Federal Trade Commission's website.

Please be advised that as part of the pre-employment screening process, NCC Solutions, Inc. ("NCC") plans to obtain a consumer report, also known as a credit report, on all applicants. This report will likely include information as to your creditworthiness, character, work habits, performance and experience. This report will be used for the purpose of making hiring decisions. Under the FCRA, NCC cannot request any information from a consumer-reporting agency without an individual's written consent. As a result, we are requesting you fill out and sign this consent form and return it with your application for employment.

Pursuant to the FCRA, you may request that NCC disclose the nature and scope of any investigation, which may be governed by the FCRA. This request must be in writing and must be received by NCC at the time you submit your application for employment.

If a decision is made not to employ you or otherwise contract for your services as a result of the contents of the consumer report, you will be provided a free copy of the consumer report. Should you wish to explain any items that appear on the report, please contact NCC within three (3) days of receiving this report from NCC. Should you wish to contest any information that appears on the report, you must contact the consumer-reporting agency directly.

CONSENT TO RELEASE CONSUMER

By signing below, I authorize consumer-reporting agencies to release to NCC any information that legally can be disclosed in consumer and consumer investigative reports to NCC under the Fair Credit Reporting Act and related state laws, both before NCC makes any decisions about my employment and during my employment with NCC, if I am hired.

Signature: _____ Date: _____

For identification purposes, applicants should print the following information:

First, Middle, Last Names (Include Previous Names):

Mailing Address: _____

Social Security Number: _____

AGREEMENT: I authorize NCC Solutions, Inc., doing business as NCC Solutions, Inc. to investigate all statements contained in this application and to obtain evaluations from all former employers, schools attended and personal references. If I have made any misrepresentations or omission of fact, or if the results of an investigation are unsatisfactory, I understand that my application may be rejected or I may be dismissed, if hired. I hereby release NCC Solutions, Inc. or any agent acting on its behalf and any former employers from any liability for damage that may result from such investigation or the disclosure of information concerning my former or prospective employment.

After employment, I understand that I will receive a copy of NCC Solutions, Inc. Employee Handbook and that the rules and regulations discussed therein are subject to change by NCC Solutions, Inc. without prior notice to employees; therefore, the Employee Handbook, as well as other policy communication tools, should not be viewed as terms or condition of an employment contract, either expressed or implied.

I understand that this application will be considered only for open/posted positions that are available when the application is submitted.

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