



Dear Applicant:

Thank you for your interest in Casa Q, an Equal Opportunity Employer. Please take a moment to read the following information before beginning the application.

1. Persons wishing to apply for a position with Casa Q must be at least 21 years of age.
2. Casa Q works with a target population of vulnerable youth. State licensing regulations applying to our agency:
  - a. Specifically forbid the employment of any person convicted of any criminal offense involving the mistreatment of children, including trafficking of an illegal substance or assault.
  - b. Require the agency to have on file a copy of the employee's criminal record clearance (CRC) prior to working unsupervised with any resident or client.
3. In addition Casa Q requires that all employees must:
  - a. Provide proof of a valid New Mexico driver's license.
  - b. Qualify under our agency insurance.
  - c. Not have been convicted of a DWI or DUI in the previous five (5) years.
  - d. Provide proof of current personal auto insurance.
  - e. Provide a copy of appropriate licensure if applicable.
  - f. Provide verification of education (diploma, transcripts, etc.)
  - g. Provide a work history, explaining any gaps in employment.

If you have read and understand the above agency requirements, please complete the attached application and submit it along with a **cover letter and resume**. In the event you qualify for an open position, you will be notified and we will schedule an interview. If no positions for which you qualify are open at the current time, your application will be kept on file for 30 days and you may be contacted during that time for an available position that matches your qualifications.

**You can return your application, cover letter and resume to:**

**Email:** [eliza.nmcasq@gmail.com](mailto:eliza.nmcasq@gmail.com)

**Fax:** 888-270-0791

**Or Mail:** PO Box 36168 Albuquerque, NM 87176



## Employment Application

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

### Applicant Information:

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alt. Phone/Email \_\_\_\_\_

Position Desired \_\_\_\_\_ Available Start Date \_\_\_\_\_

Are you available to work: ☐ Full Time ☐ Overnight ☐ Weekends

Are you a citizen of the United States? ☐ YES ☐ NO  
If no, are you authorized to work in the US? ☐ ☐

### Education:

Background	Name & Location of School	Highest Grade Completed	Major Area of Study
High School		9 / 10 / 11 / 12 / GED	
College		1 2 3 4	
Trade, Business or Grad School			

### Licenses or Certificates:

\_\_\_\_\_

\_\_\_\_\_

## Qualifications:

Do you have training or skills in any of the following area? Check all that apply. If yes, indicate number of hours and date of training. If you have taken college courses or trained in similar topics indicate what those topics or subjects were.

Training Topics	Yes/No	Dates of Training /Hours
First Aid/CPR (current)		
Managing Aggressive Behavior		
Crisis Prevention Intervention		
Medication Management		
Child Abuse & Neglect Laws		
Communication Skills & Techniques		
Conflict Resolution		
Crisis Management / Intervention		
Child & Adolescent Development		
Knowledge of Abusive Family Dynamics		
Cycle of Violence Dynamics		
Identifying Client Strengths		
Therapeutic Behavior Management		
Etiology & Symptoms of Emotional Disturbances		
Ethnic & Cultural Awareness		
Accessing Community Resources & Services		
Disciplinary Strategies		
Positive Youth Development Techniques		
Shelter Culture of Care		
HIPAA Requirements & Law		
Current Criminal Records Check (CRC)		
Trauma Informed Practices		
Expressive Arts		
Other:		
Other:		
Other:		
Other:		
Other:		
Other:		
Other:		
Other:		

## Military Service:

Branch	Rank	Date of Service	Type of Discharge

If discharge other than honorable, explain:

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## Personal Information:

	YES	NO
Are you at least 21 years of age?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a valid NM driver's license?	<input type="checkbox"/>	<input type="checkbox"/>

If no, explain: \_\_\_\_\_

Have you been convicted of a DWI or DUI in the past 5 years?	<input type="checkbox"/>	<input type="checkbox"/>
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If yes, explain: \_\_\_\_\_

Have you been arrested for offenses dealing with the maltreatment of children?	<input type="checkbox"/>	<input type="checkbox"/>
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If yes, explain: \_\_\_\_\_

Have you been arrested for violations or moral turpitude?	<input type="checkbox"/>	<input type="checkbox"/>
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If yes, explain: \_\_\_\_\_

Have you had any traffic violations within the last 3 years?	<input type="checkbox"/>	<input type="checkbox"/>
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If yes, explain: \_\_\_\_\_

Is there anything in your background that might cause concern about hiring you to work with children (ie. arrests, convictions, drug use, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
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If yes, explain: \_\_\_\_\_

**Driver Information:**

Casa Q Insurance Policy requires that employees who drive on agency business, either in a personal or company vehicle, must be insurable. Please provide proof of current automobile insurance regularly. Acceptable driving record is a continuing condition of employment.

Drivers License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Birth Date \_\_\_\_\_ Social Security # \_\_\_\_\_

I understand that such information may be required now and from time to time in the future to comply with the safety program of Casa Q, and/or requirements of companies providing insurance to the Agency. I authorize Casa Q to obtain information from the Department of Motor Vehicles on my driving history.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Employment History:**

Casa Q requires an accurate, complete, full and part time employment record, by month and year, for the last 3 years. Start with your present or most recent employer. Please include explanation of any gaps of 3 months or more in your employment history. Use a separate sheet if necessary.

Employer Name \_\_\_\_\_ Phone # \_\_\_\_\_

Dates of Employment From: \_\_\_\_\_ to \_\_\_\_\_ Title \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone # \_\_\_\_\_

Reason for Leaving

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To be completed by Casa Q Staff:

Person Contacted \_\_\_\_\_

Applicant's Employment History was verified: ☐ Yes ☐ No

Casa Q Staff Initial \_\_\_\_\_ Date \_\_\_\_\_ Casa Q

Employer Name \_\_\_\_\_ Phone # \_\_\_\_\_

Dates of Employment From: \_\_\_\_\_ to \_\_\_\_\_ Title \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone # \_\_\_\_\_

Reason for Leaving

\_\_\_\_\_

\_\_\_\_\_

To be completed by Casa Q Staff:

Person Contacted \_\_\_\_\_

Applicant's Employment History was verified: ☐ Yes ☐ No

Casa Q Staff Initial \_\_\_\_\_ Date \_\_\_\_\_

Employer Name \_\_\_\_\_ Phone # \_\_\_\_\_

Dates of Employment From: \_\_\_\_\_ to \_\_\_\_\_ Title \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone # \_\_\_\_\_

Reason for Leaving

\_\_\_\_\_

\_\_\_\_\_

To be completed by Casa Q Staff:

Person Contacted \_\_\_\_\_

Applicant's Employment History was verified: ☐ Yes ☐ No

Casa Q Staff Initial \_\_\_\_\_ Date \_\_\_\_\_

## Gaps of 3 Months or More in Employment History:

From \_\_\_\_\_ To \_\_\_\_\_

Explanation \_\_\_\_\_

\_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Explanation \_\_\_\_\_

\_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Explanation \_\_\_\_\_

\_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Explanation \_\_\_\_\_

\_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

Explanation \_\_\_\_\_

I herby declare that the information provided by me in this application for employment is true, correct and complete to the best of my knowledge. I understand that any misstatement or omission of fact of fact on this application may deny my consideration for employment. I also understand that if employed, any misstatement or omission of fact on this application shall be considered cause for rejection or dismissal.

I further authorize investigation of all statements in this application as may be necessary in arriving at the employment decision including obtaining information from my current or former employers. I release and discharge Casa Q and former employers from all claims or actions which I now have, or which may arise from, the making of any inquiries about me in connection with any of my applications for employment.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

### Reference Request #1:

Name of Reference\* \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

*\*Friends and family members do not qualify as references.*

### Reference Request #2:

Name of Reference\* \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

*\*Friends and family members do not qualify as references.*

### Reference Request #3:

Name of Reference\* \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

*\*Friends and family members do not qualify as references.*



# Authorization for Release of Information

Your signature authorizes Casa Q to release your personal information and/or Social Security number for the following purposes:

- Criminal Background Clearance Check
- Motor Vehicle Driving Record Check
- New Hires Reporting to the State of New Mexico
- Contract Audits
- Certification Audits
- Credentialing
- Agency Insurance Renewal

As deemed necessary for Casa Q to comply with standards and requirements of a non-profit agency in the community.

Your signature also authorizes Casa Q to receive information for new hire purposes:

- Employment Verification
- References

**I authorize Casa Q to release my personal information and/or social security number under one or more of these circumstances listed above. I authorize Casa Q to conduct employment verification and reference checks.**

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_