



To: All Prospective Aides
From: Momentum Valley Village Human Resource Department

Thank you for your employment interest with our company. Momentum Valley Village is a non profit organization which provides developmentally delayed individuals with various types of services ranging from Residential Programs to Day Programs.

To allow you to make a decision if this is the ideal job for you, please read this entire section before completing the application:

- California Driver's License: A valid vehicle operator's license is mandatory if you are applying for our Residential Program.
Paperwork: Prior to starting work ALL new hire paperwork must be completed and submitted to Human Resources.
Fingerprints: Due to Federal requirements ALL employees must be fingerprinted prior to their start of employment.
Misrepresentation: Should it ever be determined during the course of your employment that anything stated in your application is remotely incorrect or falsified your employment may be terminated.
Minimum Education Requirement: High School Diploma or Equivalent
Minimum Age: All applicants must be 18 or older due to State Regulations.
Time Conflicts: All employees hired agree to work the assigned hours of the position.
Orientations: All residential employees must be available for a series of Wednesday evening training sessions.
Physical/TB: All employees must complete a physical/TB test before starting their training.
CPR/First Aid: Yearly CPR along with First Aid is mandatory for all.
Benefits: Momentum Valley Village does not offer benefits of any type to part time staff.
Hours: If hired for a particular shift, any extra hours you are able to pick up during the course of your employment is without any implication that you have or will be considered a full time employee.
Lifting: This job will require you to lift adults in the course of your employment.
At Will Employment: Either the employee or employer may terminate the relationship at any time.

This cover sheet to your application is designed to provide you the applicant with important information about our policies, rules, and benefits. Please read it thoroughly. If you have any questions about these items please ask the individual who will interview you shortly.

If there is a discrepancy between a verbally communicated policy and procedure, our manual will take precedence unless otherwise notified by the Executive Director. This document is not to be construed as a legal document or a contract of employment.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ Printed Name of Applicant \_\_\_\_\_



**EMPLOYMENT APPLICATION**

It is the policy of Momentum Valley Village to recruit, hire and promote for all positions on the basis of merit, qualification and competence. No aspect of employment will be influenced by race, color, national origin, religion, ancestry, citizenship, marital status, medical condition, sex, sexual orientation, pregnancy, age, physical/mental disability or any other characteristics protected by applicable state or federal civil rights laws. All employment decisions will be made solely upon the basis of the individual's qualifications as related to the requirements of the position being filed.

<b>PERSONAL DATA (PLEASE PRINT)</b>			
Full Name (Last, First, Middle)			Date
Street Address		City, State, Zip Code	
Social Security Number	Daytime Phone Number	Alternate Phone Number	
Email Address			
Have you ever used another name which employment may be verified? <input type="checkbox"/> No <input type="checkbox"/> Yes (please list)		If hired, can you present evidence of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you at least 18 years of age? (Proof of age and work permits may be required prior to hiring). <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever been employed by Momentum Valley Village? If <b>yes</b> , please list position, location and dates. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name any relatives and/or friends currently or previously employed by Momentum Valley Village?		How were you referred to Momentum Valley Village?	

<b>WORK PREFERENCE</b>								
What position are you applying for?			Salary Desired: \$ _____			Date available for employment:		
Are you available to work : (Check all that apply) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary	Available to Work Indicate days/hours Start	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
		End						
Are you able to perform the essential functions of the job you are applying with or without reasonable accommodations? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>no</b> , please describe what type (s) of reasonable accommodations needed:								
Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, are you at least 21 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No Has your driver's license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> , please list dates and explain:								
Have you ever been convicted of a crime (felony or misdemeanor) OTHER THAN (1) a marijuana-related conviction that occurred more than two years ago; (2) an offense for which was referred to, and participated in, any pre-trial or post-trial diversion program? <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>yes</b> , please state the conviction, the county and state, and the nature of the offense: _____								
<b>NOTE: An affirmative response to this question will not result in your automatic disqualification for employment.</b>								

<b>EDUCATION</b>					
Name and Address of School	Graduated Yes No	Number of Years Completed	Course of Study	Diploma/Degree	

High School						
College						
Business/Trade School						
Other						

**SKILLS**

Type:  Yes  No \_\_\_\_\_WPM      10-key:  Yes  No \_\_\_\_\_WPM

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for the position you are applying for? (i.e. language skills, computer skills). Please list below.

\_\_\_\_\_

\_\_\_\_\_

**U.S MILITARY SERVICE**

Service Branch:	Initial Rank:	Final Rank:
Specialty:	Special Training Received:	Discharge Date:

**WORK EXPERIENCE** List all of your jobs in the past ten years. *Begin with your present or most recent employer and must be completed even if supplemented by a resume.*

Company Name:	Telephone :
Address:	Dates of Employment: From:_____ To:_____
Supervisor's Name and Title:	Reason for Leaving:
Your Job Title and Job Duties:	May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Company Name:	Telephone:
Address:	Dates of Employment: From:_____ To:_____
Supervisor's Name and Title:	Reason for Leaving:
Your Job Title and Job Duties:	May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Company Name:	Telephone:
Address:	Dates of Employment: From:_____ To:_____

Supervisor's Name and Title:	Reason for Leaving:
Your Job Title and Duties:	May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Please identify and explain all periods of employment gaps during the last ten years:

From:	To:	Reason of Unemployment:

PROFESSIONAL REFERENCE (Do not include relatives or personal friends)			
Name	Company/Occupation	Phone Number	Yrs. Acquainted

EMERGENCY CONTACT				
Name	Address	City, State, Zip Code	Relationship	Telephone

I certify that I have been informed of the duties of the position for which I am applying and that the information on the application is correct and complete to the best of my knowledge. I agree to have any of the statements checked by the company unless I have indicated to the contrary. However, I understand that falsification or omission of any material information on this application, or failure to pass the physical examination and background check, if I receive a job offer it may be considered sufficient cause for immediate termination. I agree that if employed, I will abide by all policies and procedures established by the company.

I hereby acknowledge that my employment is "at will", that I may resign at any time and the employer may terminate my employment at any time, with or without cause, that any assurances of continued employment, whether written, oral or by conduct, shall not be interpreted as changing the nature of the employment relationship unless specifically acknowledged in writing by the Executive Director and/or Human Resource Department of the employer.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



Employment/Personal Reference Check Form

**Applicant Consent to Contact References:**

I acknowledge that I have completed an application with Momentum Valley Village. I hereby give consent to any and all prior employers to provide information to Momentum Valley Village with regard to my employment. I also give consent to any personal reference to provide a character reference to Momentum Valley Village.

**Applicant Name Printed:** \_\_\_\_\_  
**Applicant Signature:** \_\_\_\_\_  
**Social Security Number:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

-----Applicant Please do not write below this line-----

**EMPLOYMENT REFERENCE**

Employer Name: \_\_\_\_\_ Date Checked: \_\_\_\_\_  
 Individual Giving Reference: \_\_\_\_\_ Job Title: \_\_\_\_\_

**1. Please verify the following information given to us by the applicant to see if it is correct.**

Employment Information	Correct	Incorrect	If incorrect, please provide the correct information
Employment Dates Given to			
Job Title:			
Reason for Leaving:			

**2. How would rate this individual on the following?**

	Outstanding	Above Average	Average	Below Average
Team Player (with clients, co-workers, supervisors)				
Dependability/Attendance:				
Flexibility:				
Work Quality:				
Motivated, self-starter:				

**3. Is the individual eligible for rehire with your company?**

Yes    No    Current Employee (If no, please state reason why) \_\_\_\_\_

**PERSONAL REFERENCE**

Name of Reference: \_\_\_\_\_ Date Checked: \_\_\_\_\_

How many years have you known the applicant?

How do you know the applicant?

Do you believe the applicant is reliable?      Yes       No

Do you feel the applicant has the character and personality to work with developmentally disabled clients?      Yes       No

Do you feel the applicant would be a valuable asset to our company?      Yes       No

**Momentum Valley Village Pre-Employment Test**

1. Nancy is going to the beach with the day program. She is allergic to BEE STINGS and needs special medication if she is stung. The Aide will be required to pack insect repellent spray and apply sunscreen that does not contain perfume. Nancy will also require monitoring to make sure she stays away from the trash cans. How will the Aide prepare for this outing? **(Choose all correct answers).**
  - A. Tell Nancy that she **cannot** go on the outing.
  - B. Pack a can of insect repellent spray and apply sunscreen that is odor free.
  - C. Nancy will require monitoring and redirect her away from trash cans.
  - D. NONE OF THE ABOVE.
  
2. There are methods used to protect people from contracting diseases, wearing disposable gloves, wearing a face shield and washing hands frequently. Brandon soiled his pants and requires a change of clothing and must have his teeth brushed and flossed. The Aide will then need to administer his prescribed medication once the Aide changes his clothes and brushes his teeth. What precautions must the Aide take in handling these tasks? (Circle the precautions)
  - A. Wear disposable gloves when changing Brandon's soiled clothing.
  - B. Wear a face shield when flossing Brandon's teeth (due to clients' gums bleed).
  - C. Wash hands.
  - D. NONE OF THE ABOVE.
  
3. Danny is to receive 150mg of prescribed medication tablets. The pharmacy issued small white tablets of 50mg. How many tablets do you need to give Danny?
  - A. Four
  - B. Five
  - C. Three
  - D. Two
  
4. The Aide was administering Donnie's scheduled medication tablet, he spit the tablet out and fell onto the floor that was just mopped. Wasted medication tablets are not to be thrown in the trash or flushed down the toilet. The Aide placed the wasted tablet in a labeled envelope for the nurse and gave Donnie a fresh tablet. What did the Aide do with the wasted tablet?
  - A. Throw wasted tablet down the toilet and/or into the garbage can.
  - B. The floor was just mopped; gave the tablet to the client.
  - C. Place wasted tablet in labeled envelope for nurse and give a fresh tablet to the client.
  - D. NONE OF THE ABOVE.
  
5. Josie was prescribed an antibiotic, the side effects are SUN SENSITIVITY and her day trip has been cancelled. Josie is requesting to go outside, the Aide has taken precaution and applied sunscreen and provided her with a hat. It is too hot for Josie to wear a long sleeve shirt; therefore, Josie will require supervision to avoid her stepping into the sun. What will the Aide be required to do for Josie? **(Circle all correct answers).**
  - A. Tell Josie to stay inside the house.
  - B. Provide, supervise and apply sunscreen to uncovered skin.
  - C. Provide a hat and long-sleeved shirt (if weather allows).
  - D. NONE OF THE ABOVE.