



Community Helping Hands, Inc.

The Gateway Center

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(CHH is a 501(c)(3) not-for-profit corporation. Est. March 2001)



Name
Last
First
Middle In.

Application for Placement

Type of placement: Employee Volunteer TANF Worker Community Service Other _____

Referral Agency _____ Caseworker _____ Phone _____

Name _____
Last First Middle In.

Permanent Address _____
Street City State Zip Code

Phone No. _____ Driver's License No. _____ Exp. _____

Are you 18 yrs of age or older? Yes No If not, state your age _____ Date of Birth (Optional) _____

Are you a United States Citizen? Yes No If not, do you have a legal right to work in this country? Yes No

Person to contact in case of emergency: _____ Phone No. _____

Placement Desired:

Stores Maintenance Office Sewing Room Driver Shipping Family Center Any

Position: _____ Date you can start: _____

How would you intend to commute to our locations? _____

Do you have relatives at this organization? Yes No If yes, who? _____

Are you currently under a doctor's care? Yes No If yes, explain? _____

EDUCATION	Name of School	Location of School	Number of Yrs Attended	Subjects Studied or Degree Obtained
High School				
College				
Trade, Business or Correspondence School				

Special Skills:

Heavy Equipment Forklift Truck Driving Plumbing Electrical General Construction Sewing

Office Skills Youth Food Service Counseling Ministry People Transportation

Hobbies/Interests: _____

US Military Service: _____ Rank: _____

Have you ever been convicted of a crime? Yes No If yes, please explain: _____

Please continue on other side →

FORMER EMPLOYERS/ORGANIZATIONS

(List below your last three employers/organizations, starting with the most recent and working backwards. Please explain any gaps in dates for employment.)

DATE Month and Year	NAME, ADDRESS, and PHONE of EMPLOYER	SALARY (Hourly or Annually)	POSITION	REASON for LEAVING
From:				
To:				
Work Performed:				
From:				
To:				
Work Performed:				
From:				
To:				
Work Performed:				

FOR EMPLOYMENT APPLICANTS:

We are an equal opportunity employment company. We are dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion, national origin, disability, marital status, or arrest record.

As a condition of employment, you may be required to have a “post employment offer” physical examination and/or drug screening test.

FOR ALL APPLICANTS:

I hereby give authorization to check the references given in this application. I understand that misrepresentation or omission of facts called for will not be interpreted in my favor.

Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

Interviewed by: _____ **Date:** _____

Remarks: _____

Date Placed: _____ **Position:** _____