

Victims of Violence Intervention Program, Inc. Artemis House

PO Box 486, Spearfish, SD 57783, 605-642-7825

Application for Employment

General Information:									
First Name		.ast Name			 Middle Initial	 Date of Application			
Tilst Name	_	ast Name			Wildale IIIIllai	Date of Application			
Address		City			State, Zip				
Cell Phone		Email							
Are you a United States Country Yes No If no, are you authorized to		tes?	Pc	osition Applied For					
☐ Yes ☐ No Have you ever been convicted of a felony? Or criminal offense? ☐ Yes ☐ No				Education – Please indicate highest level of completion. □ High School/GED □ College/University □ Professional/Technical □ Post Graduate					
May we contact your present employer?			M	Major Field of Study					
Employment Information	: Begin with your most r	ecent employm	nent.						
<u>'</u>	Present/Most Recent E		Previously E	mployed By:	Previousl	y Employed By:			
Name of Organization									
Supervisor									
Nature of Business									
Dates of Employment									
Position Held									
Ending Salary									
Reason for Leaving									
Professional References:	List two individuals when	n vou have a pr	nfessional acc	ociation with and	to whom you are r	not related			
Professional References: List two individuals whom Name		Phone Number		Title/Place of Employment		iot relateu.			
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Additional Information:							
How did you hear about the Artemis House?							
How the you hear about the Artemis House:							
Please summarize special skills and qualifications which you possess which prompted your interest in the Artemis House.							
Waiver of Truth and Permission for Investigation							
I certify that answers given herein are true and complete to the best of my knowledge. I authorize the staff of Artemis House to make such							
investigations and inquiries of my personal, employment, financial, medical or criminal history and other related matters as may be necessary							
in arriving at an employment decision. I hereby release employers, institutions of learning or persons from all liability in responding to							
inquiries in connection with my application. 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 and regulations of Artemis House.							
Job Application Disclaimer and Acknowledgement							
I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is							
grounds for refusing to hire me, or for discharge should I be hired. I authorize any of the persons and organizations listed in this application to							
give you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to							
request and receive such information. In consideration of my employment, I agree to conform to the rules and regulations of the organization.							
I acknowledge that rules may be changed, withdrawn, added or interpreted at any time, at the organization's sole option and without prior							
notice to me. I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time,							
with or without cause, and with or without prior notice at the option of the company or myself. I understand that no representative of the							
company has any authority to enter into any agreement for employment for any specified period of time or to promise any other personnel							
action, either before or after I accept employment, or to guarantee any benefits or terms or conditions of employment or to make any other							
agreement which is contrary to this agreement. I have read and understand this agreement.							
Confidentiality & Conduct Pledge							
I understand that individuals using the programs and services of Artemis House are often involved in emotional, dangerous, or crisis situations,							
and may have suffered multiple forms of abuse. I realize the need for these individuals to be safe and in caring relationships that are free from							
fear of careless information sharing. I agree to maintain a relationship of trust and privacy with all Artemis House clients. I agree to not divulge							
verbal or written information about clients, their situation, family, etc. to any individual or agency outside Artemis House. I will only disclose							
knowledge/information regarding Artemis House clients upon a signed Release of Information form from a client or by subpoena. I also agree							
to conduct myself in a professional, responsible, and respectful manner in regard to fellow Artemis House employees, volunteers, and Board of							
Director members, keeping operation and business information within the confines of the agency. I also agree to do nothing that would reflect							
negatively on Artemis House or harm its reputation. For cause, Artemis House reserves the right to immediately terminate this agreement.							
By signing below, I am accepting the responsibilities involved with the aforementioned (Waiver of Truth and Permission for Investigation, Job Application Disclaimer and Acknowledgement, and Confidentiality and Conduct Pledge) and understand that behavior to the contrary will							
result in consequences that include progressive disciplinary action.							
Signature Date							

For Office Use Only									
Hired									
	Yes								
	No	Starting Date	Salary						