



Please mail, email, or fax your application to one or more of the following locations, according to which job(s) or location(s) you are interested in joining

<p>Eastern Region – HR Great Circle 330 North Gore Ave. Webster Groves, MO 63119 Phone: (314)968-2060 Fax: (314)919-4887 Email: HR_Eastern@GreatCircle.org</p>	<p>South Central Region – HR Great Circle PO Box 189 St. James, MO 65559 Phone: (573)265-3251 Fax: (573)265-8320 Email: HR_SouthCentral@GreatCircle.org</p>
<p>Central Region – HR Great Circle 4304 South Bearfield Rd. Columbia, MO 65201 Phone: (573)874-8686 Fax: (573)447-8899 Email: HR_Central@GreatCircle.org</p>	<p>Southwest Region – HR Great Circle 1212 W. Lombard Springfield, MO 65806 Phone: (417)865-1646 Fax: (417)865-2202 Email: HR_Southwestern@GreatCircle.org</p>
<p>Western Region – HR Great Circle 18610 E 37th Terr South Independence, MO 64057 Phone: (816)922-9436 Fax: (816)795-1488 Email: HR_Western@GreatCircle.org</p>	<p>Northwestern Region – HR Great Circle 1126 East Highway WW Marshall, MO 65340 Phone: (660)831-8108 Fax: (816)795-1488 Email: HR_Northwestern@GreatCircle.org</p>



Great Circle strives to make the application process as easy as possible. It is our goal to maintain high standards for the betterment of our families and children.

Please let us know if we can be of further help to you!

Great Circle Core Values

Compassion – Fun – Diversity – Stewardship – Mission-Focused – Transparency – Integrity –
Professional Excellence

Were you referred by a Great Circle Employee?

Great Circle is proud to have a Recruit and Reward Program. Please list the name of the employee who referred you so they can get credit!

For more information on how and who can earn with the Recruit and Reward Program, contact your Regional HR Director!

EMPLOYMENT APPLICATION



Position Applied for: _____

Today's Date: _____

Name: _____

Current Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

APPLICANT NOTE

This application form is intended for use in evaluating your qualifications for employment. It is not an employment contract. Please answer all appropriate questions completely and accurately. False or misleading statements on the application and during the interview are grounds for terminating the application process or, if discovered after employment, terminating employment. Federal law provides penalties for false statements on documents related to U.S. employment eligibility. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, color, age, creed, national origin, sexual orientation, military reserve membership, ancestry, religion, height, weight, use of a guide or support animal because of blindness, deafness or physical handicap, or the presence of disabilities. Great Circle reserves the right to conduct the following investigations for security reasons: child abuse/neglect, motor vehicle report, reference checks and a criminal history report. After offer of employment, prior to reporting to work, you may be required to submit to a medical review.

AVAILABILITY

What date can you start? _____

Full-Time Part-Time PRN (As Needed)

What Schedule(s) are you available?

Weekdays Weekends Evenings Overnights Overtime

EDUCATION

Please circle highest grade completed. 7 8 9 10 11 12 13 14 15 16+

	Name	City/State	Area of Study/Major	Did you Graduate?
High School				<input type="checkbox"/> YES <input type="checkbox"/> NO
Undergraduate				<input type="checkbox"/> YES <input type="checkbox"/> NO
Graduate				<input type="checkbox"/> YES <input type="checkbox"/> NO
Other				<input type="checkbox"/> YES <input type="checkbox"/> NO

PROFESSIONAL LICENSES

Please List all professional licenses: _____

PREVIOUS EMPLOYERS

Please list ALL employers for the last FIVE YEARS, your most recent employer first. Continue to next page if needed.

May we contact your present employer? YES NO

MOST RECENT EMPLOYER

Company Name City State

Phone: () _____ Fax: () _____ Email: _____

From _____ To _____

Dates Employed Job Title Supervisor Name

_____ \$ _____

Salary Hourly Annual Weekly Reason for Leaving _____

SECOND MOST RECENT EMPLOYER

Company Name City State

Phone: () _____ Fax: () _____ Email: _____

From _____ To _____
Dates Employed _____ Job Title _____ Supervisor Name _____

_____ \$ _____
Salary Hourly Annual Weekly _____ Reason for Leaving _____

THIRD MOST RECENT EMPLOYER

_____ Company Name _____ City _____ State _____
Phone: () _____ Fax: () _____ Email: _____
From _____ To _____
Dates Employed _____ Job Title _____ Supervisor Name _____

_____ \$ _____
Salary Hourly Annual Weekly _____ Reason for Leaving _____

FOURTH MOST RECENT EMPLOYER

_____ Company Name _____ City _____ State _____
Phone: () _____ Fax: () _____ Email: _____
From _____ To _____
Dated Employed _____ Job Title _____ Supervisor Name _____

_____ \$ _____
Salary Hourly Annual Weekly _____ Reason for Leaving _____

FIFTH MOST RECENT EMPLOYER

_____ Company Name _____ City _____ State _____
Phone: () _____ Fax: () _____ Email: _____
From _____ To _____
Dated Employed _____ Job Title _____ Supervisor Name _____

_____ \$ _____
Salary Hourly Annual Weekly _____ Reason for Leaving _____

JOB RELATED NOTE: Do NOT fill out any of this part if you believe it is not job related.

Have you lived or worked outside the state of Missouri in the past 5 years? If Yes, where.

YES NO _____

If the job requires, do you have a valid Missouri driver's license?

YES NO

Have you EVER had any tickets/moving violations? If yes, please describe below.

YES NO _____

Have you been employed by the State of Missouri, Department of Social Services?

YES NO If yes, did you leave in good standing? _____

Have you ever been discharged from employment or asked to resign by an employer?

YES NO If yes, please provide company name and details _____

While Great Circle Requires that a job applicant be completely candid about their prior criminal history, a criminal history or pending charges in and of itself does not exclude an individual from being considered for employment.

NOT APPLICABLE TO COLUMBIA, MO APPLICANTS

Are you currently under charges or have pending charges for any criminal offense?

YES NO If yes, please provide the following:

Date of charge: _____ City: _____ State: _____ County: _____

Circumstances (Identify Charge(s)): _____

For any criminal acts, have you ever been convicted, pled guilty or nolo contendere, or received a suspended imposition of sentence (regardless of whether incarceration actually occurred)?

YES NO

If yes, this does not necessarily exclude you from consideration for employment.

Provide an explanation for each incident, including misdemeanors or felonies, and indicate whether you are currently on or have been on supervised or unsupervised probation.

Date of charge: _____ City: _____ State: _____ County: _____

Circumstances (Identify Charge(s)): _____

Have you ever been involved as a perpetrator in any child abuse or elder abuse which resulted in the physical, mental, or emotional abuse or neglect, or sexual abuse of a child, elder person or eligible adult which was substantiated and documented by a state agency but not necessarily proven in court and whether a criminal conviction of any kind also occurred?

YES NO If yes, provide the following:

Date of charge: _____ City: _____ State: _____ County: _____

Circumstances (Identify Charge(s)): _____

How did you hear about Great Circle? Ad in Paper Great Circle website

Other; please list _____

Have you EVER worked for Great Circle? Yes No

If so, please give title(s) and dates: _____

Do any of your relatives currently work for Great Circle? Yes No

If so, please list names: _____

CERTIFICATION AND RELEASE

I certify that I have read and understand the applicant note on page one of this document and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this application may result in rejection of my application or discharge or discharge at any time during my employment. I authorize the company and/or its agents, including consumer reporting bureaus to verify any of this information including, but not limited to, child abuse/neglect criminal history and motor vehicle driving records. I authorize all persons, schools, companies, law enforcement authorities **to release any information** concerning my background and hereby release any said persons, schools, companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. I am willing to submit to drug testing to detect the use of illegal drugs prior to employment, I understand that any employment with Great Circle is **at-will** and my employment may be terminated at any time for any reason.

Signature: _____ Date: _____

By typing your name in the signature box, you are providing an electronic signature that is legally binding.

Voluntary Self-Identification

Great Circle annually completes an Affirmative Action Plan. As part of the plan we are required to identify qualified candidates who apply for openings in our company. This form is provided for you to voluntarily complete. Participation will not affect or guarantee your opportunity for employment however we appreciate your cooperation.

General Instructions: The information from this survey is used to help ensure that our practices meet the requirements of Federal law. Your responses are voluntary however your cooperation in providing accurate information is critical. Please answer each of the questions to the best of your ability. Please print clearly. Thank you.

Name: _____ Date: _____

Position Applied for: _____ Zip Code: _____

What Prompted your application?

Referral State Employment Agency Walk-in Ad Response

Other Please identify: _____

Gender: Male _____ Female _____

Ethnicity (Check all that apply):

- ___ **White** – (Not Hispanic or Latin) – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- ___ **Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- ___ **Black or African American** (Not Hispanic or Latino) – A person having origins in any of the black racial groups of Africa.
- ___ **Asian** (Not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- ___ **Native Hawaiian or Other Pacific Islander** (Not Hispanic or Latino) – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Island.
- ___ **American Indian or Alaska Native** (Not Hispanic or Latino) – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- ___ **Two or more races** – A person having origins in two or more of any of the aforementioned categories.

Disability Status:

- Disabled Individual** – A person who has a physical or mental impairment which substantially limits one or more of such a person’s major life activities, had a record of such impairment, or is regarded as having such impairment.

Military/Veteran Status:

- Disabled Veteran.**
 - Recently Separated Veteran.**
 - Other Protected Veteran** – Served during a war or in campaign or expedition for which a campaign badge has been authorized.
 - Armed Forces Service Medal Veteran.**
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