

The Huda Academy

3221 Anna Street :: Little Rock, AR 72204

Phone: 501-565-3555 Fax: 501-565-3203

WHERE GUIDANCE PROMOTES EXCELLENCE

APPLICATION FOR EMPLOYMENT

NOTE: Please answer each of the following questions fully and accurately. No action can be taken on this application until all questions have been answered. **PLEASE PRINT.**

JOB APPLIED FOR: _____ DATE: _____

NAME: _____ PHONE: _____

ADDRESS: _____

EMAIL: _____ SSN: _____

ARE YOU AGE 18 OR OLDER? YES [] NO [] APPLIED HERE BEFORE? YES [] NO []

EVER EMPLOYED HERE BEFORE? YES [] NO [] IF YES, WHEN? _____

NUMBER OF DAYS MISSED WORK IN LAST 6 MONTHS: _____

HAS A COURT EVER DENIED YOU PARENTAL CUSTODIAL OR VISITATION RIGHTS? YES [] NO []

IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED OF **ANY** OF THE FOLLOWING: YES [] NO []

1) CAPITAL MURDER, 2) 1ST OR 2ND DEGREE MURDER, 3) MANSLAUGHTER, 4) 1ST OR 2ND DEGREE BATTERY, 5) AGGRAVATED ASSAULT, 6) 1ST DEGREE TERRORISTIC THREATENING, 7) KIDNAPPING, 8) 1ST DEGREE FALSE IMPRISONMENT, 9) PERMANENT DETENTION OR RESTRAINT, 10) 1ST OR 2ND DEGREE RAPE OR CARNAL ABUSE, 11) 1ST OR 2ND DEGREE SEXUAL ABUSE, 12) 1ST OR 2ND DEGREE VIOLATION OF A MINOR, 13) INCEST, 14) 1ST DEGREE ENDANGERING OF MINOR, 15) PERMITTING CHILD ABUSE, 16) ENGAGING CHILDREN IN SEXUALLY EXPLICIT CONDUCT FOR THE USE IN VISUAL OR PRINT MEDIUM, TRANSPORTATION OF MINORS FOR PROHIBITED SEXUAL CONDUCT, USE OF A CHILD OR CONSENT TO USE OF A CHILD IN SEXUAL PERFORMANCE, BY PRODUCING, DIRECTING OR PROMOTING SEXUAL PERFORMANCE BY A CHILD, 17) CRIMINAL ATTEMPT, CRIMINAL SOLICITATION OR CRIMINAL CONSPIRACY TO COMMIT ANY OF THE ABOVE OFFENCES, 18) DISTRIBUTION TO MINORS (OF ANY CONTROLLED SUBSTANCE), 19) MANUFACTURE, DELIVERY, OR POSSESSION WITH INTENT TO DELIVER OR MANUFACTURE ANY CONTROLLED SUBSTANCE; AND, 20) CARNAL ABUSE IN THE THIRD DEGREE, 21) SEXUAL SOLICITATION OF A CHILD, 22) PANDERING OR POSSESSION OF PRINT MEDIUM DEPICTING SEXUALLY EXPLICIT CONDUCT INVOLVING A CHILD, 23) NEGLIGENCE HOMICIDE, 24) ASSAULT IN THE THIRD DEGREE, 25) COERCION, 26) SEXUAL MISCONDUCT, 27) PUBLIC SEXUAL INDECENCY, 28) INDECENT EXPOSURE, 29) ENDANGERING THE WELFARE OF A MINOR IN THE SECOND DEGREE, 30) ANY FELONY OR MISDEMEANOR INVOLVING VIOLENCE OR SEXUAL MISCONDUCT.

EDUCATION: (Please give name, address, location, highest grade completed, date of leaving)

High School or GED: _____

College or University: _____

College Major _____ Did you graduate YES [] NO [] Year. _____

Advanced Degree or Coursework _____

Additional Education, Vocational, Technical Training Information _____

HEALTH: Do you have any physical limitations which could interfere with your performance of this job?
YES [] NO [] If yes, explain: _____

Would you take a physical examination if required? YES [] NO []

Do you have documentation of an annual TB skin test? YES [] NO []

Do you have any allergies YES [] NO [] If yes, please explain: _____

WORK HISTORY: Please attach a resume or list below all work history for the past six years. If self-employed, supply business references. Please give month and year.

Name of Employer Address & Phone No.	Dates: (From / To)	Duties: (Describe Briefly)	Last Supervisor (Name / Phone No.)	Reason For Leaving

Are you now, or do you expect to be engaged in other business or employment? YES [] NO []

If yes, please explain: _____

Please explain any additional information (relative to names, aliases, nicknames) which could potentially be necessary in order for **The Huda Academy** to obtain verification of your work record:

REFERENCES: Please provide names, complete addresses, phone numbers, and email for three people (not relatives or former employers) we may contact to inquire about you.

Name: _____ Phone: _____

Address: _____ Email: _____

Name: _____ Phone: _____

Address: _____ Email: _____

Name: _____ Phone: _____

Address: _____ Email: _____

NARRATIVE: Please explain your interest in becoming a part of our team? What interests you in our program?

What, in your opinion, best qualifies you for this job? _____

AFFIDAVIT: I hereby certify that all information presented in this application is true and correct to the best of my knowledge. I understand that consequential omissions, misleading and otherwise incorrect statements shall be cause for termination in the event of employment. I authorize The Huda Academy and/or its duly appointed representatives to make the necessary background checks and verifications of information I have provided herein. Further, I authorize the individuals and institutions I have listed (above) to release information regarding my employment, character and qualifications. I hereby release them from all liability in providing the same.

Signature

Date

For Office Use Only:

Date Employed: _____ Date of Separation _____