



APPLICATION FOR EMPLOYMENT

Please download and complete the following application and send to rachna@dayahouston.org along with your most current resume and cover letter. **Resumes without a completed application form will not be considered.** Daya Inc. is an equal opportunity employer, and all applicants will be given equal consideration regardless of sex, race, religious creed, color, national origin, disabilities, marital status, status as a veteran, age, sexual orientation, or any other basis protected by federal, state or local laws. Daya will hold all information provided as confidential and will use it only for the purposes of consideration for employment of the position for which the application is submitted.

| A. PERSONAL INFORMATION | | | |
|---|--|------------------------|-------------------------------------|
| Last Name | | First Name | Middle |
| Street Address | | City | State Zip code |
| Social Security No.: | Home Phone: | Work Phone: | May we contact you there? YES NO |
| Cell Phone: | | E-Mail Address: | |
| Driver's License Number | | State of Issuance | |
| Are you at least 18 years of age? If hired, you will be asked to produce proof of age and work permit if necessary. | | | YES NO |
| If hired, can you present evidence of your U.S. citizenship or proof of your legal right to work in the United States? | | | YES NO |
| Have you ever been convicted of a felony which has not been annulled or sealed in court? If yes, explain on page four. This information will not necessarily bar you from employment. | | | YES NO |
| Are you a veteran of the U.S. military service | | | YES NO |
| If hired, would you have a reliable means of transportation to and from work | | | YES NO |
| B. YOUR EMPLOYMENT INTERESTS | | | |
| Position Applied for: | | Salary Expected: | Date Available: |
| Applying for: | Full Time Part Time ____ hours per week available | How were you referred? | |
| Are you currently enrolled in school? | YES | NO | |

| C. EDUCATION: Name and Location of Schools | | # of Years Completed | Did you Graduate? Year graduated | | Course of Study Degree Obtained | GPA |
|--|------------------|----------------------|-------------------------------------|----|------------------------------------|-----|
| Graduate School(s) | Name Location | years | YES | NO | CoS Degree | |
| College or University | Name Location | years | YES | NO | CoS Degree | |
| High School | Name Location | years | YES | NO | CoS Degree | |

Describe any other business, technical, or military training, post graduate studies, research grants, etc.

D. EMPLOYMENT HISTORY

Describe your employment history in full, even if it is in the attached resume. Start with present or most recent employer. If any position was part time, indicate average number of hours per week you worked. Use additional page if required. **(Present or most recent first)**

| | | | |
|-----------------------------|---|---|---------------------------------|
| Company Name | | Company Telephone No. | |
| | | May we contact for references? | YES NO |
| Address: Street | City | State | Zip code |
| Name of Supervisor: | | Supervisor's Title: | Supervisor's current phone no.: |
| Your Title: | Describe your work: | | # of hours if part time: |
| Employed (mo/yr) From To | Base salary: per hour per year Start Final | Other compensation (bonus or commission): | |
| Reason for leaving: | | | |

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| Your Title: | Describe your work: | | # of hours if part time: |
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| Reason for leaving: | | | |

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| Your Title: | Describe your work: | | # of hours if part time: |
| Employed (mo/yr) From To | Base salary: per hour per year Start Final | Other compensation (bonus or commission): | |
| Reason for leaving: | | | |

| | | | |
|--|--|----------------------------|-------|
| E. GENERAL BACKGROUND: | | | |
| Language Proficiency (list languages known other than English and circle proficiency): | | | |
| Language: | Speak | Read | Write |
| Language: | Speak | Read | Write |
| Language: | Speak | Read | Write |
| Technical Proficiency (tick or list all applications that apply): | | | |
| _____ MS Office Suite | _____ Constant Contact | _____ Adobe Creative Suite | |
| _____ Osnum | _____ Donor Management Software (i.e. donor perfect, Kindful, Raiser's Edge, etc.) | | |
| Others: | | | |

Please use the space below to describe any additional skills or abilities that would relate to this position, to add any additional references, or to explain any answer given earlier. Also, use this space to list any relevant professional organization to which you belong. Please omit those, which indicate your race, color, national origin, ancestry, religion, sex, age, sexual orientation, or political affiliations.

PLEASE READ AND INITIAL EACH PARAGRAPH. SIGN AND DATE BELOW.

My initials next to each item, and my signature below, indicate my agreement to the following:

_____ I have not knowingly withheld any information that might adversely affect my chances for employment, and the answers given by me are true and correct to the best of my knowledge. I understand that any omission or mis-statement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge, if I am employed, regardless of the time elapsed before discovery.

_____ This is an "at will" position which means if employed, I may resign at any time for any reason, and the agency may terminate my employment at any time, with or without cause.

_____ Any offer of employment is conditional upon my ability to submit proof of my legal right to work in the United States and my agreement with, and signature on, the agency's

Confidentiality Agreement.

I hereby authorize the agency and its agents, employees, and representatives to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the organization any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the organization, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand this Agreement and I signed it of my own free will after having been given an opportunity to ask questions and receive satisfactory answers in a manner in which I could understand.

Signature

Date