HUMANIM

JOHNS HOPKINS HIRELOCAL

Job Seeker Interest Form

How were you referred to us? [ ]  Website [ ]  Job Fair Name: Click here to enter text. [ ] Flyer [ ] Community group *Name:* Click here to enter text. [ ] Workforce program *Name:* Click here to enter text. [ ] Faith Based Organization *Name:* Click here to enter text. [ ] Other *(please provide):* Click here to enter text.

PERSONAL INFORMATION Date of Application: Click here to enter a date.

Name: Last: Click here to enter text. First: Click here to enter text.

Address: Click here to enter text. City: Click here to enter text. State: Click here to enter text. Zip Code: Click here to enter text. Cell Phone #: Click here to enter text. Alternative phone #: Click here to enter text. Email address: Click here to enter text.

Have you ever worked for Johns Hopkins Health System: [ ]  **No** [ ]  **Yes**

Dates employed: Click here to enter text.

*Job title:* Click here to enter text. *Are you eligible for re-hire?* [ ]  ***Yes*** [ ]  ***No***

Have you ever worked for Johns Hopkins University: [ ]  **No** [ ]  **Yes**

Dates employed: Click here to enter text.

*Job title:* Click here to enter text. *Are you eligible for re-hire?* [ ]  ***Yes*** [ ]  ***No***

Have you ever applied for employment at JHHS/JHU? If so, please provide job title and dates:

1. Click here to enter text.

2. Click here to enter text.

Are you 18 years or older? [ ]  ***Yes*** [ ]  ***No*** *Proof of minimum age may be required as a condition of employment.*

Are you a US citizen or otherwise authorized to work in the United States? [ ] ***Yes*** [ ]  ***No***

*If offered a position, you will be required to submit documentation verifying this statement.*

If selected for employment are you willing to submit to a pre-employment drug and health screening test?

[ ]  **Yes** [ ]  **No**

CAREER INTEREST *(check all that apply)*

***Review each job description at*** [***http://humanim.com/teljobs***](http://humanim.com/teljobs)

**Johns Hopkins University**

|  |
| --- |
| **Administrative** |
| Administrative Secretary [ ]   |
| Medical Office Coordinator [ ]  |
| Administrative Coordinator [ ]   |
| Patient Service Coordinator [ ]   |
|  |
| **Medical Assistance** |
| Medical Assistant [ ]   |
|  |
| **Environmental** |
| Custodian [ ]  |
| Maintenance Mechanic I [ ]   |
| Maintenance Mechanic II [ ]   |
|  |
| **Research** |
| Research Program Assistant [ ]  |
| Laboratory Helper [ ]   |
| Animal Facilities Assistant [ ]   |
| Animal Facility Specialist [ ]   |
| Animal Cage Washer [ ]   |

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AVAILABILITY:

*Date you are available to start:*

Which are you interested in? [ ] **Full-time** [ ]  **Part-time**

Please indicate shifts you are available:[ ]  **Day** [ ]  **Evening** [ ]  **Night** [ ]  **Rotating** [ ]  **Weekends**

***Please state your available hours to work below:***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| Hours *(From-To)* | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Do you understand the majority of Hopkins positions are considered essential positions, and if hired, you will be required to work in inclement weather? [ ] **Yes** [ ]  **No**

Summarize special job-related skills, qualifications, specialized training acquired from employment or other experiences:

Click here to enter text.

EDUCATIONAL BACKGROUND:

|  |
| --- |
| *Check highest grade completed* [ ]  H.S. Diploma [ ]  GED [ ]  Technical School [ ]  AA Degree [ ]  Bachelor’s Degree [ ]  Master’s Degree + I am currently a Student? [ ]  **No** [ ]  **Yes** Name of School: Click here to enter text.Major: Click here to enter text. |
| Did you attend any training programs? [ ]  **No** [ ]  **Yes** if yes, provide name and completion date: Click here to enter text.Do you have any professional certifications? [ ]  **No** [ ]  **Yes** if yes, in what field: Click here to enter text.  |
| Have you completed any internship(s)? [ ]  **No** [ ]  **Yes** if yes, please provide date and describe duties: Click here to enter text. |
| Do you speak any foreign languages? [ ]  **No** [ ]  **Yes** if yes, which language(s): Click here to enter text.Read? [ ]  **No** [ ]  **Yes**; Language: Click here to enter text.Write? [ ]  **No** [ ]  **Yes**; Language: Click here to enter text.  |
| What is your level of computer skill? Word: [ ]  Basic [ ]  Intermediate [ ]  Advanced Wpm: Click here to enter text.Excel: [ ]  Basic [ ]  Intermediate [ ]  AdvancedPowerPoint: [ ]  Basic [ ]  Intermediate [ ]  Advanced |

EMPLOYMENT HISTORY:

*Please list current and/or most recent work experience*

Are you presently employed?[ ]  **No** [ ]  **Yes** Current/Previous Salary: Click here to enter text. Salary expectations: Click here to enter text.

1. Company Name: Click here to enter text. Job Title: Click here to enter text.

Dates of employment: Start: Click here to enter text. End: Click here to enter text. Supervisor name: Click here to enter text. Address: Click here to enter text. City/State: Click here to enter text. Phone #: Click here to enter text.

Pay rate: Click here to enter text. [ ]  per hour [ ]  per year

Duties: Click here to enter text.

Reason for leaving: Click here to enter text.

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2. Company Name: Click here to enter text. Job Title: Click here to enter text.

Dates of employment: Start: Click here to enter text. End: Click here to enter text. Supervisor name: Click here to enter text. Address: Click here to enter text. City/State: Phone #: Click here to enter text. Pay rate: Click here to enter text. [ ]  per hour [ ]  per year

Duties: Click here to enter text.

Reason for leaving: Click here to enter text.

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3. Company Name: Click here to enter text. Job Title: Click here to enter text.

Dates of employment: Start: Click here to enter text. End: Click here to enter text. Supervisor name: Click here to enter text.

Address: Click here to enter text. City/State: Click here to enter text. Phone #: Click here to enter text.

Pay rate: Click here to enter text. [ ]  per hour [ ]  per year

Duties: Click here to enter text.

Reason for leaving: Click here to enter text.

REFERENCES

1. Name: Click here to enter text. Business relationship: Click here to enter text.

Address: Click here to enter text. City: Click here to enter text. State: Click here to enter text. Zip Code: Click here to enter text.
Phone No.: Click here to enter text. Cell Phone: Click here to enter text. Email: Click here to enter text.

2. Name: Click here to enter text. Business relationship: Click here to enter text.

Address: Click here to enter text. City: Click here to enter text. State: Click here to enter text. Zip Code: Click here to enter text.
Phone No.: Click here to enter text. Cell Phone: Click here to enter text. Email: Click here to enter text.

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3. Name: Click here to enter text. Business relationship: Click here to enter text.

Address: Click here to enter text. City: Click here to enter text. State: Click here to enter text. Zip Code: Click here to enter text.
Phone No.: Click here to enter text. Cell Phone: Click here to enter text. Email: Click here to enter text.

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**Informed Consent Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree/understand that by signing this consent form, I am allowing Humanim Inc., to share information from my screening and interview with Johns Hopkins University, for the purpose of being referred to the HireLocal Initiative.

I understand that Humanim’s sole role is to review my employment information and make referral recommendations based on the minimal requirements specified in the TEL job description. I understand that Humanim is not responsible for making final employment decisions.

I agree to participate in the screening and interview for this initiative. I understand related materials will remain confidential and will not be distributed outside of Humanim and Johns Hopkins University.

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Name (Print) Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date