



1065 Lochland Road, Geneva, NY 14456
 phone 315-789-5208 fax 315-789-4597

Lochland is an equal opportunity employer and will not discriminate in the hiring process on the basis of race, color, religion, sex, national origin, age, disability, veteran, or marital status.

(Please Print)

Position(s) Applied For:		Date:	
Referral Source: <input type="checkbox"/> Employee: _____ <input type="checkbox"/> Relative: _____ <input type="checkbox"/> Advertisement <input type="checkbox"/> Employment Agency <input type="checkbox"/> Walk-In <input type="checkbox"/> Other: _____			
NAME:			
(Last)		(First)	(Middle)
ADDRESS:			
(Number & Street)		(City)	(State) (Zip Code)
TELEPHONE NUMBERS		Home: _____	
	Cell: _____	Email: _____	
Please circle the appropriate response to the following questions:			
Are you 18 years of age or older?		Yes	No
Are you a US Citizen?		Yes	No
Have you ever been employed at Lochland School? If yes, date: _____ Position held: _____		Yes	No
On what date would you be available start work? _____			
Are you available to work: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Per Diem			
Check All that apply: <input type="checkbox"/> Daytime <input type="checkbox"/> Evening <input type="checkbox"/> Overnight			
Can you complete the functions of this job as outlined in the attached job description?		Yes	No
Do you have a current valid driver's license?		Yes	No
Have you ever been convicted of any moving violation, D.W.I., and driving violation, or other infraction? If yes, please explain: _____		Yes	No
Have you ever been convicted of a crime in New York State or elsewhere? If yes, please explain: _____		Yes	No
Have you ever had a substantiated allegation of abuse or neglect against a child or adult? If yes, describe _____		Yes	No

EDUCATION

High School Name:

Address:

Number of Years Completed:

Diploma/Degree:

Describe Course of Study: _____

College/University Name:

Address:

Number of Years Completed:

License #:

Diploma/Degree:

Describe Course of Study: _____

Graduate/Professional Name:

Address:

Number of Years Completed:

License #:

Diploma/Degree:

Describe Course of Study: _____

If applicable do you have the required license(s) to perform this job: ____ Yes ____ No

Describe specialized training, certificates, skills, licenses and/or degrees: _____

Do you have previous experience working with developmentally disabled persons?

If yes, please describe your experience: _____

Employment Experiences:

Start with your present or last position held.
Include military service assignments and volunteer activities.
Exclude organization names that indicate race, color, religion, sex or national origin.

Employer:

Address:

Telephone:

Job Title:

Supervisor:

From:

To:

Reason For Leaving:

Duties:

Employer:

Address:

Telephone:

Job Title:

Supervisor:

From:

To:

Reason For Leaving:

Duties:

Employer:

Address:

Telephone:

Job Title:

Supervisor:

From:

To:

Reason For Leaving:

Duties:

If you need additional space please continue on a separate sheet of paper.

REFERENCES

Give name, address and telephone number of three (3) references who are not related to you and are not previous employers:

Name:

Address

Telephone:

Name:

Address

Telephone:

Name:

Address

Telephone:

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not, and is not intended to be, a contract of employment.

In the event of employment I understand that false or misleading information given on my application or in interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of Lochland School, Inc.

Signature of Applicant: _____ Date: _____

FOR PERSONNEL DEPARTMENT USE ONLY

Interview: ___ Yes ___ No

Remarks: _____

Employed: ___ Yes ___ No

Date of Employment:

Position Title:

Rate:

Department:

Status: ___ Full Time ___ Part Time

By:

Date:

(Name & Title)

Conditions of employment are dependent upon verification of the following:

Back Ground Check: Federal, State, County and City per OPWDD regulation

Drug Testing: Per Lochland School, Inc. policy

Previous Employment: Employment history including Dates and Job Title

- 1) I grant Lochland School, Inc. permission to verify the information stated on the attached application including previous employment history, reference, and education.

Signature Date

- 2) I grant Lochland School, Inc. permission to conduct a criminal background check.

Signature Date

- 3) To the best of my knowledge there is no physical, psychological or medical reason that would impair my ability to perform my job as outlined in my job description.

Signature Date

- 4) Lochland School, Inc. reserves the right to test all Lochland Job applicants and employees for illegal drug use per Lochland School, Inc. policy and current Federal State and local laws. I hereby grant Well Now Urgent Care permission to release my test results to Lochland School, Inc. All test results will be kept confidential.

Signature Date



Direct Support Professional (DSP)

Qualifications: Must be able to assist developmentally disabled persons with all aspects of daily living, including but not limited to personal hygiene, ambulation and dining and community activities; must have valid and current NYS driver's license; must have a high school diploma or GED; must be able to pass criminal background check per OPWDD regulation; must be able to pass drug test; and must be able to work flexible hours as designated by Lochland School, Inc.; must be able to attend mandatory training and meetings. Must be able to lift 40lbs.

Supervisor: Residential Director, House Supervisor

Responsibilities: Assist Lochland residents with their daily living skills and special challenges, including bathing, dining, dressing and personal hygiene needs

Assist individuals as needed with ambulation, as well as assist individuals with wheelchair use and transfers to/from their wheelchair to their bed, bath, toilet, or vehicle(s)

Support and initiate activities, which promote individual productivity, self-esteem, independence and community integration to persons living at Lochland

Supervise and participate in daily activities, including but not limited to, transporting individuals on outings or home visits, shopping, doctor's appointments, banking, exercise programs, swimming, religious services, and a variety of community activities

Complete all Lochland and OPWDD required documentation e.g. continuous notes, residential and day habilitation tracking sheets, medication and treatment records, assignment/task/bedcheck sheets, behavioral records, fire drill records, and business office records

Administer medications once certified; maintain annual certification (fulltime & part time staff only)

Carry out all individualized plans including Individual Protective Oversight Plan's, Residential Habilitation, Day Habilitation, Behavior Support Plans, and Nursing Care Plans

Assist in Day Habilitation Program plans and activities as assigned

Attend mandatory meetings and trainings as required by Lochland

Acquire and maintain required certifications, including CPR, Standard 1st Aid, SCIP-R within 120 days of hire and annually or as required

Perform all duties as designated by the Executive Director, Deputy Director, Residential Director, Asst. Residential Director, House Manager, Asst. House Manager, or Manager on Duty

Adhere to all Lochland School, Inc. Policies and Procedures, State & Federal Regulations, Lochland Corporate Compliance Program and Code of Conduct