



# Fairview Recovery Services, Inc.

## Application for Employment

*Equal Opportunity/Culturally Competent/Affirmative Action Employer*  
*Fairview Recovery Services, Inc. strongly encourages women and minorities to apply*  
Business Office: 5 Merrick Street  
Binghamton, New York 13904  
Telephone: 607-722-8987  
Fax #: 607-722-6767



The Federal law prohibits discrimination in employment because of race, color, religion, sex, handicap, national origin, marital status. Public Law 90-202 prohibits discrimination because of age. The laws of some states prohibit some or all of the above-mentioned types of discrimination.

### Personal

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First Middle

Name(s) used in previous employment and/or education: \_\_\_\_\_

Is additional information relative to change of name (use of an assumed name or nickname) necessary to enable a check of your work record? Yes No If yes, explain: \_\_\_\_\_

Present Address: \_\_\_\_\_  
No. Street City State Zip

Telephone #: \_\_\_\_\_ Email Address: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

How long have you been a resident of present city or state address? \_\_\_\_\_

Previous Address: \_\_\_\_\_  
No. Street City State Zip

How long did you live there? \_\_\_\_\_ Are you legally eligible to work in the United States? Yes No

If no, type of visa: \_\_\_\_\_

Are you at least 18 years old? Yes No

What/who interested you in Fairview Recovery Services, Inc.?

N.Y.S. Employment Advertisement Employment Agency Other: \_\_\_\_\_

Job position applied for: \_\_\_\_\_ Rate of pay expected: \_\_\_\_\_ \$ per: \_\_\_\_\_

Classification: full time part time (FRS, Inc. is a 24 hour/7 day/365 days a year Continuum of Care.) Shift Preference: 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup>

Are you available to work weekends? Yes No Are you available to work holidays? Yes No

Have you ever applied or worked for Fairview Recovery Services, Inc. before? Yes No

If yes, details: \_\_\_\_\_

Are you related to a Fairview Recovery Services, Inc. Board of Directors member or agency staff member? €Yes €No

If yes, give name: \_\_\_\_\_

If hired, on what date will you be available to start work? \_\_\_\_\_

Do you feel you have any special experiences, skills, or qualifications? \_\_\_\_\_

\_\_\_\_\_

Have you ever been denied bond or coverage under bond? Yes No

If yes, give details: \_\_\_\_\_

Have you ever been sanctioned, or had a professional license temporarily or permanently revoked? Yes No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a crime other than a minor traffic infraction? Yes No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

## Record of Education

School	Name and Address of School	Course of Study	List Diploma or Degree
High			
College			
Other (Specify)			

## Physical

Is there any reason why you would be unable to perform the duties as outlined in the position's job description that you are applying for?    Yes    No

## Military Service Record

Were you in the U.S. Armed Forces?    Yes    No    If yes, what branch? \_\_\_\_\_ Describe education and experience obtained during service: \_\_\_\_\_

Did you receive an honorable discharge?    Yes    No

Employment at Fairview Recovery Services, Inc. requires interaction with people who are of diverse cultural backgrounds. Please detail any relevant experience: \_\_\_\_\_

## Employment History **(Must be completed do not leave blank. Telephone numbers are required.)**

List all present and past employment beginning with your most recent. Include information related to previous employment with Fairview Recovery Services, too.

Name and Address of Company	From	To	Describe the work you did:	Salary	Reason for Leaving	May We Contact
	MO/YR	MO/YR				Yes    No
<b>Telephone:</b>			Supervisor's Name:			

Name and Address of Company	From	To	Describe the work you did:	Salary	Reason for Leaving	May We Contact
	MO/YR	MO/YR				Yes    No
<b>Telephone:</b>			Supervisor's Name:			

Name and Address of Company	From	To	Describe the work you did:	Salary	Reason for Leaving	May We Contact
	MO/YR	MO/YR				Yes    No
<b>Telephone:</b>			Supervisor's Name:			

Name and Address of Company	From	To	Describe the work you did:	Salary	Reason for Leaving	May We Contact
	MO/YR	MO/YR				Yes    No
<b>Telephone:</b>			Supervisor's Name:			

Name and Address of Company	From	To	Describe the work you did:	Salary	Reason for Leaving	May We Contact
	MO/YR	MO/YR				Yes    No
<b>Telephone:</b>			Supervisor's Name:			

# **Applicant's Certification and Agreement**

(Please read carefully)

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. Fairview Recovery Services, Inc. is hereby authorized to make any investigation of my personal history and financial and credit record through any investigation or credit agencies or bureaus chosen. I also acknowledge that this application includes releases signed by me for a Motor Vehicle and Criminal Conviction Background check.

**Fairview requires job applicants to be drug-free. Employment drug screening is required before hiring.**

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

## **Personal References**

Please list three (3) personal references; **not associated with or previously listed in your employment history:**

Name and Address	Phone Number	Occupation
1.		
2.		
3.		

## **Mission Statement**

*Fairview Recovery Services helps people with the disease of alcoholism, chemical dependency and co-occurring conditions live independent, healthy and productive lives by providing a continuum of individualized services and care.*



## **Cultural Competence Mission Statement**

*Fairview Recovery Services, Inc. is committed to the achievement of racial, ethnic and cultural diversity within its workforce which will provide a critical component toward delivering culturally and linguistically competent care to the community it serves.*



**Fairview Recovery Services, Inc.**  
**Release and Authorization to Conduct**  
**Criminal Conviction Background Check\***

In consideration of Fairview Recovery's evaluation of my suitability for employment, I, \_\_\_\_\_, do hereby authorize and agree that Fairview Recovery Services, Inc. may

**Applicant's Name**

perform a full criminal conviction background check in order to verify the information I have provided in this regard on Fairview's employment application. I understand and agree that Fairview may obtain any criminal court documents and/or police records that may be relevant to any and all of my criminal convictions, whether or not I have listed such criminal convictions in answer to Fairview's employment application. I further understand that my failure to make a full disclosure of any criminal convictions in answer to Fairview's employment application or my making false statement(s) regarding any criminal conviction(s) may subject me to immediate dismissal at any time in the future.

I agree not to assert any claims or causes of action of any kind against Fairview Recovery Services, Inc., its officials, its agents, and/or its employees as a result of this criminal conviction background check. I further release and forever discharge Fairview Recovery Services, Inc., its officials, its agents, and its employees from any and all claims, demands, damages, actions, causes of action or suits or any kind arising from Fairview Recovery Services, Inc.'s investigation of my criminal conviction background. I acknowledge that Fairview Recovery Services, Inc. has made no representations of any kind as to whether employment will be offered at the conclusion of this criminal conviction background check.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Human Resource Verification

\_\_\_\_\_  
Date

FAILURE TO COMPLETE AND SIGN THIS FORM WILL DISQUALIFY  
YOU FROM ANY CONSIDERATION FOR EMPLOYMENT WITH  
FAIRVIEW RECOVERY SERVICES, INC.

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**New York Correction Law, Article 23-A**

**\*Please refer to (and retain for your personal records) Attachment 1; New York Correction Law, Article 23-A, Licensure and Employment of Persons Previously Convicted of One or More Criminal Offenses.**

**I have received a copy of New York Correction Law Article 23-A, Licensure and Employment of Persons Previously Convicted of One or More Criminal Offenses.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date





# FAIRVIEW RECOVERY SERVICE'S, INC.

5 Merrick Street  
Binghamton, New York 13904

## BACKGROUND INVESTIGATION AGREEMENT

I, the undersigned Applicant, in exchange for consideration of my possible employment by **FAIRVIEW RECOVERY SERVICES, INC.**, (hereafter "Company"), in which I understand may frequently require me to handle sensitive or confidential information in a highly-responsible fashion, hereby agree as follows:

1. **Report Authorization.** I authorize the Company to conduct or hire a Consumer Reporting Agency to conduct an investigation into my educational record, employment history, credit history, criminal and driving record, and personal background for the purpose of preparing an investigative report that may assist the Company in determining my suitability for employment.
2. **Report Confidentiality.** The Company agrees to treat any investigative report it receives about me in a strictly confidential manner. It will not disclose the contents of such a report to any person other than to me or to its senior employees who will make the decision whether to hire me.
3. **Report Disclosure.** The Company agrees that I am entitled upon written request to receive a copy on any investigative report filed with the Company.
4. **Adverse Decision.** The Company agrees that, if such an investigative report is prepared by a Consumer Reporting Agency rather than by employees of the Company and then any information in the report is likely to influence an adverse employment decision, it will provide me with an appropriate "pre-adverse action disclosure" under the Federal Fair Credit Reporting Act. They further agree that, if such an adverse employment decision is thereafter made, they will provide me with an appropriate "adverse action notice" under the Act.
5. **Reference Authorization.** I authorize my current and former employers and their employees, or any personal references I have listed on my resume, to release any information to the Company and its employees or contractors which the Company may reasonably deem relevant to my consideration for employment. I also authorize any current and former educational institutions I've attended and their employees to verify my attendance or graduation to the Company and its employees or contractors.
6. **Limited Release.** I agree to release and hold harmless the Company and its employees, my current and former employers, my personal resume references, and my current and former educational institutions, from any liability (other than for grossly negligent behavior), which they may incur in connection with their activities arising under the preceding terms of this Agreement.

IN WITNESS WHEREOF, I agree to this release and I have set my hand on this \_\_\_\_\_  
Day  
 day of the month of \_\_\_\_\_ in the year of \_\_\_\_\_.  
Month Year

**\*All applicants:**

**Please completely fill out the following SECTION 1 ONLY**

**SECTION 1**

**Applicant: Please fill out Section 1 ONLY**

Applicant's Name: \_\_\_\_\_  
Please Print

Applicant's Signature: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

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**SECTION 2: FOR FAIRVIEW RECOVERY SERVICES, INC. USE ONLY**

**EMPLOYMENT INFORMATION**

**Previous Employer: Please fill out Section 2**

Job Title / Position Held: \_\_\_\_\_

Employment Dates: \_\_\_\_\_ TO: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Did the applicant meet your organization's attendance standards?      Yes      No

Remarks \_\_\_\_\_

Did the applicant meet your organization's performance standards?      Yes      No

Remarks \_\_\_\_\_

Would you rehire this applicant?      Yes      No

Remarks \_\_\_\_\_

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Agency Name: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Individual completing this form

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

# ATTACHMENT 1 – APPLICANT’S COPY OF RIGHTS\*

## NEW YORK CORRECTION LAW ARTICLE 23-A LICENSURE AND EMPLOYMENT OF PERSONS PREVIOUSLY CONVICTED OF ONE OR MORE CRIMINAL OFFENSES

**SS 750.** Definitions. For the purposes of this article, the following terms shall have the following meanings:

- (1) “Public agency” means the state or any local subdivision thereof, or any state or local department, agency, board or commission.
- (2) “Private employer” means any person, company, corporation, labor organization or association which employs ten or more persons.
- (3) “Direct relationship” means that the nature of criminal conduct for which the person was convicted has a direct bearing on his fitness or ability to perform one or more of the duties or responsibilities necessarily related to the license, opportunity, or job in question.
- (4) “License” means any certificate, license, permit or grant of permission required by the laws of this state, its political subdivisions or instrumentalities as a condition for the lawful practice of any occupation, employment, trade, vocation, business, or profession. Provided, however, that “license” shall not, for the purposes of this article, include any license or permit to own, possess, carry, or fire any explosive, pistol, handgun, rifle, shotgun, or other firearm.
- (5) “Employment” means any occupation, vocation or employment, or any form of vocational or educational training. Provided, however, that “employment” shall not, for the purposes of this article, include membership in any law enforcement agency.

**SS 751.** Applicability. The provisions of this article shall apply to any application by any person for a license or employment at any public or private employer, who has previously been convicted of one or more criminal offenses in this state or in any other jurisdiction, and to any license or employment held by any person whose conviction of one or more criminal offenses in this state or in any other jurisdiction preceded such employment or granting of a license, except where a mandatory forfeiture, disability or bar to employment is imposed by law, and has not been removed by an executive pardon, certificate of relief from disabilities or certificate of good conduct. Nothing in this article shall be construed to affect any right an employer may have with respect to an intentional misrepresentation in connection with an application for employment made by a prospective employee or previously made by a current employee.

**SS 752.** Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited. No application for any license or employment, and no employment or license held by an individual, to which the provisions of this article are applicable, shall be denied or acted upon adversely by reason of the individual’s having been previously convicted of one or more criminal offenses, or by reason of a finding of lack of “good moral character” when such finding is based upon the fact that the individual has previously been convicted of one or more criminal offenses, unless:

- (1) there is a direct relationship between one or more of the previous criminal offenses and the specific license or employment sought or help by the individual; or
- (2) the issuance or continuation of the license or the granting or continuation of the employment would involve an unreasonable risk to property or to the safety or welfare of specific individuals or the general public.

**SS 753.** Factors to be considered concerning a previous criminal conviction; presumption.

1. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall consider the following factors:

- (a) The public policy of this state, as expressed in this act, to encourage the licensure and employment of persons previously convicted of one or more criminal offenses.
- (b) The specific duties and responsibilities necessarily related to the license or employment sought or held by the person.
- (c) The bearing, in any, the criminal offense or offenses for which the person was previously convicted will have on his fitness or ability to perform one or more such duties or responsibilities.
- (d) The time which has elapsed since the occurrence of the criminal offense or offenses.
- (e) The age of the person at the time of occurrence of the criminal offense or offenses.
- (f) The seriousness of the offense or offenses.
- (g) Any information produced by the person, or produced on his behalf, in regard to his rehabilitation and good conduct.
- (h) The legitimate interest of the public agency or private employer in protection property, and the safety and welfare of specific individuals or the general public.

2. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall also give consideration to a certificate of relief from disabilities or a certificate of good conduct issued to the applicant, which certificate shall create a presumption of rehabilitation in regard to the offense or offenses specified therein.

**SS 754.** Written statement upon denial of license or employment. At the request of any person previously convicted of one or more criminal offenses who has been denied a license or employment, a public agency or private employer shall provide, within thirty days of a request, a written statement setting forth the reasons for such denial.

**SS 755.** Enforcement.

1. In relation to actions by public agencies, the provisions of this article shall be enforceable by a proceeding brought pursuant to article seventy-eight of the civil practice law and rules.
2. In relation to actions by private employers, the provisions of this article shall be enforceable by the division of human rights pursuant to the powers and procedures set forth in article fifteen of the executive law, and, concurrently, by the New York city commission on human rights.

**\* All applicants:**

**Please remove this ‘Attachment 1’ and retain for your own personal records.**