



Children Achieving Maximum Potential, Inc.  
Phone: 301-591-9776

**Application materials must be returned:**

**By Mail:** ChAMP, 100 West Road, Suite 300, Towson, MD 21204

**By Email:** [applications@childrenachieving.com](mailto:applications@childrenachieving.com)

**By Fax:** 443-740-9276

**Application for Employment**

Full Legal Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

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

Drivers License #: \_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Position Applying for: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Days and Hours Available to work:

\_\_\_\_\_

\_\_\_\_\_

Available Start Date: \_\_\_\_\_

Please describe your experience working with individuals with Autism or other related disabilities. Please be as specific as possible in terms of the experience and the time spent in the position. Use the attached Appendix as a guide.

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

Please list your employment history (include the name of the organization, your position, date of your employment, address, phone number, and contact name) or attach a copy of your resume.

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\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
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Have you ever been fired from a job? Yes \_\_\_ No \_\_\_; If yes, please explain:

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Have you ever been charged with a misdemeanor or a felony? Yes \_\_\_ No \_\_\_; If yes, please explain:

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List specific skills that you feel qualify you for the job for which you are applying:

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Do you speak a foreign language? If so, please list what language(s) including sign language?

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Do you have a skill in which you excel that you would be interested in teaching our clients (e.g. sports, musical instruments, art, swimming, karate)? If so, please list below:

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Do you prefer to work indoors or outdoors? \_\_\_\_\_

Do you have a preference for working in a tutoring situation or recreational/community setting?

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Do you have a preference for working with a child that is high functioning or has more challenges?

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Do you prefer to work with child/children of a certain age?

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Are you willing to help a child with activities of daily living, such as hygiene and toileting? If so, have you had any experience in these areas?

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**Education:**

	<b>School Name and Location</b>	<b>Field of Study</b>	<b>Did you graduate?</b>	<b>Degree/Major</b>
High School				
College				
Post College				
Business, Technology, Trade, etc.				

**Certifications and/or Licenses:**

<b>Certification / License</b>	<b>State</b>	<b>Years</b>

**Applicant Certification**

I certify that all the information on this application, my resume, or any supporting documentation is complete and accurate to the best of my knowledge. I understand that any misrepresentation, omission, or false information may result in disqualification from consideration for employment or, if employed, may cause termination of employment.

I authorize ChAMP or its representatives to confirm all statements contained in this application, resume and/or supporting documentation as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above mentioned information. I hereby release, discharge and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to ChAMP for its duly authorized representation pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability ChAMP and its representatives for seeking such information and all other persons, corporations, or organizations furnishing such information whether such information is favorable or unfavorable to me.

I understand that neither this application nor any communication by a management representative is intended to create or does create a contract of employment, offer or promise of employment. I acknowledge that if hired by ChAMP, employment is on an at-will basis. This means ChAMP is free to terminate my employment at any time, with or without cause or without notice, in accordance with state law; and acceptance of employment is not a contract of employment for any specified time. Similarly, I am free to terminate my employment with ChAMP at any time for any reason. This at-will provision may be modified or waived only in a written agreement signed by an authorized representative of ChAMP and me. I agree to conform to the rules and regulations of ChAMP, and I understand that ChAMP has complete discretion to modify such rules and regulations at any time, except that it will not modify its policy of employment at-will.

I understand and agree that if driving is a requirement of the position for which I am applying, my employment is contingent on possessing a valid driver's license and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I recognize there are inherent risks and rewards in working with children with autism and agree to hold harmless ChAMP, its owners and employees from any and all claims arising directly or indirectly from the implementation of services to clients with autism.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required sign a confidentiality, non-compete, and/or conflict of interest statement.

I understand this company only hires individuals who are legally eligible to work in the United States.

**I have read, understood and agree to abide by the above.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of ChAMP Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

We are an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this company depends solely on your qualifications.

**RETURN ALL APPLICATION MATERIALS TO OUR TOWSON OFFICE**

**Children Achieving Maximum Potential, Inc.**

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**Towson, MD 21204**

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**(do not fax or mail documents to our Rockville office)**