



# New Directions Northwest Inc.

3425 13th Street, Baker City, OR 97814

Office: (541) 523-7400

Fax: (541) 523-4927

◆Crisis 24/7: (541) 519-7126◆

[www.newdirectionsnw.org](http://www.newdirectionsnw.org)

Chief Executive Officer: Shari Selander

*"Committed to serve and support the behavioral health needs of our communities."*

Established 1967

Revised 4.11.2022ba

Applications are considered for all positions without regard to race, color, religion, gender, national origin, age, disability, marital or any other legally protected status. New Directions Northwest, Inc. is an Equal Opportunity Employer. All information contained in this application is confidential and will not be released to outside parties without your written consent.

**(Please Print Clearly)**

Position(s) Applied For: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
Street City State Zip

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_  
• Preferred method of contact:  Text  Email  Cell  Phone, specify when available: \_\_\_\_\_

As a perspective applicant for a job, are you legally eligible for employment in the U.S. \_\_\_\_\_  
• Proof of citizenship or immigration status will be required upon employment.

Do you have a current driver's license? \_\_\_\_\_  
License Number Expiration Date State

If you are under 18 years of age, can you provide required proof of your eligibility to work? \_\_\_\_\_

Per OAR 411-320-0030(6), an application for employment must inquire whether an applicant has had any founded reports of child abuse or substantiated abuse.

a) Have you had any founded reports of child abuse or substantiated abuse?  Yes  No

Have you ever filed an application with us before? \_\_\_\_\_ Date \_\_\_\_\_

Have you ever been employed with us before? \_\_\_\_\_ Date \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ May we contact your present employer? \_\_\_\_\_

Are you currently on "lay-off" status and subject to recall? \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_ Are you willing to travel? \_\_\_\_\_

Are you available to work: \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Shift Work \_\_\_\_\_ Temporary

How were you referred to our agency?

- a) Newspaper \_\_\_\_\_
- b) Employment Agency \_\_\_\_\_
- c) Walk-in \_\_\_\_\_
- d) Friend \_\_\_\_\_
- e) Relative \_\_\_\_\_
- f) Other \_\_\_\_\_

*New Directions Northwest, Inc. is an Equal Opportunity Employer and Treatment Provider.  
Discrimination is prohibited by Federal Law.*



### EDUCATION

	Name / Address	Years Completed	Diploma / Degree	Course / Major
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Graduate	_____	_____	_____	_____
Other	_____	_____	_____	_____

- Proof of educational diploma/degree/certification will be required.

Indicate any foreign languages you speak, read and/or write:

	Language(s)	Fluent	Good	Fair
SPEAK	_____	_____	_____	_____
READ	_____	_____	_____	_____
WRITE	_____	_____	_____	_____

Describe any specialized training, skills, and/or apprenticeships that you have experience in:

Training Type	# Years	Type of Equipment	Software
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe any job-related training received in the United States Military:

Training Type	# Years	Type of Equipment	Software
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list any professional associations that are directly related to your profession:

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## PREVIOUS EMPLOYMENT

**Start with your present job.** *Please include any job-related military service assignments and volunteer activities.*  
**Please do not use "refer to resume".** *(Resume may be attached as backup to this application.)*

1.

\_\_\_\_\_  
Employer Name/Address

\_\_\_\_\_  
Dates Employed

\_\_\_\_\_  
Job Title/Position

\_\_\_\_\_  
Contact Person regarding your performance

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Duties / Responsibilities

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

2.

\_\_\_\_\_  
Employer Name/Address

\_\_\_\_\_  
Dates Employed

\_\_\_\_\_  
Job Title/Position

\_\_\_\_\_  
Contact Person regarding your performance

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Duties / Responsibilities

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

3.

\_\_\_\_\_  
Employer Name/Address

\_\_\_\_\_  
Dates Employed

\_\_\_\_\_  
Job Title/Position

\_\_\_\_\_  
Contact Person regarding your performance

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Duties / Responsibilities

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

4.

\_\_\_\_\_  
Employer Name/Address

\_\_\_\_\_  
Dates Employed

\_\_\_\_\_  
Job Title/Position

\_\_\_\_\_  
Contact Person regarding your performance

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Duties / Responsibilities

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

