



Integrity Plus Economic Empowerment Training

- 2600 CHEW STREET • HOUSTON, TX 77020 • TEL: (713) 784-6055 • FAX (713) 266-1939
- 8734 WINDSWEEP LANE • HOUSTON, TX 77063 • TEL: (713) 785-1756
- 5002 WILMINGTON • HOUSTON, TEXAS 77033 • TEL: (832) 443-8103
- 10028 ALGIERS • HOUSTON, TEXAS 77041 • TEL: (713) 939-1963

PROGRAM APPLICATION FORM

This application must be completed to be considered for participation in the Jesus is Alpha and Omega Ministry (JAOM) Programs. All requested information is used solely to assess where you are in your life today, and how JAOM might best assist you in achieving your life goals/objectives. JAOM and all its subordinate programs do not discriminate in any way against any applicant because of race, religion, gender, age, national origin, marital status, physical/mental disability (unrelated to ability to perform essential job functions), protected activity, political affiliation, or veteran status. This information is intended solely to assist clients enrolled in JAOM programs as well as assisting them with obtaining potential employment opportunities upon graduation from the program. This application is the sole property of JAOM.

PERSONAL DATA

NAME: _____ TODAY'S DATE: _____
Last First MI

BIRTH DATE: _____ AGE: _____ SEX: M/F RACE (CIRCLE ONE): CAU / BLK/ HIS/ OTHER

SOCIAL SECURITY NUMBER: _____

DRIVER'S LICENSE: YES/NO DL# _____ DL STATE ISSUED: _____ CLASS: _____

PRESENT ADDRESS:

STREET: _____ CITY: _____ STATE: _____ ZIP CODE: _____

CONTACT TELEPHONE NUMBERS:

HOME: _____

CELL PHONE: _____

WORK: _____

ALTERNATE: _____

E-MAIL ADDRESS:

PRIMARY: _____

SECONDARY: _____

EMERGENCY CONTACT INFORMATION:

NAME: _____ RELATIONSHIP: _____

TELEPHONE NUMBER (S): _____

MARITAL STATUS (CIRCLE ONE): SINGLE MARRIED SEPARATED DIVORCED WIDOWED

SPOUSE NAME: _____ RESIDING TOGETHER: YES / NO CHILDREN: YES / NO

CHILD (REN) NAME(S) / AGES: _____

EDUCATION:

HIGHEST YEAR COMPLETED (CIRCLE ONE):

GRADE SCHOOL: 6 7 8 HIGH SCHOOL: 9 10 11 12 COLLEGE: 1 2 3 4 TRADE SCHOOL: 1 2 3+

HIGH SCHOOL NAME & LOCATION: _____ GRADUATED: YES / NO

BUSINESS/TRADE SCHOOL: _____ GRADUATED: YES / NO

HAVE YOU EVER SERVED IN THE ARMED SERVICES: YES / NO

SERVICE BRANCH (CIRCLE ONE): **AIR FORCE ARMY NAVY MARINES COAST GUARD**

ACTIVE DUTY / RESERVES

LENGTH OF SERVICE (YEARS / MONTHS): _____

TYPE OF DISCHARGE (HONORABLE / OTHER): _____

DO YOU HAVE A DD 214 / DISCHARGE PAPERS: YES / NO

DO YOU QUALIFY FOR ANY PROTECTED VETERAN CATEGORY (MULTIPLE CATEGORIES MAY BE SELECTED)

DISABLED VETERAN: YES / NO DID YOU SERVE ON ACTIVE DUTY STATUS DURING WAR: YES / NO EMPLOYED: YES/ NO

ARE YOU A RECENTLY SEPARATED VETERAN (DISCHARGED WITHIN THE PAST 12 MONTHS): YES / NO

ARE YOU CURRENTLY ON ANY KIND OF GOVERNMENT ASSISTANCE: YES / NO HOW LONG (YRS / MONTHS): _____

SNAP / TANF/ SOCIAL SECURITY INSURANCE / SOCIAL SECURITY DISABILITY / VETERAN DISABILITY

POTENTIAL WORK RELATED INFORMATION

ARE YOU INTERESTED IN (CIRCLE ONE):

EMPLOYMENT OPPORTUNITIES: YES / NO FULL – TIME / PART TIME WORK ARE YOU WILLING TO TRAVEL/ OUT OF STATE: YES / NO

SHIFT WORK: YES / NO ALTERNATING SHIFTS: YES / NO OVERTIME: YES / NO

DO YOU HAVE RELIABLE TRANSPORTATION: YES / NO

DO YOU HAVE YOUR OWN MEANS OF TRANSPORTATION: YES / NO

DO YOU HAVE A TRANSPORTATION WORKER IDENTIFICATION CARD (TWIC CARD) (circle one): YES / NO

IF YES, WHEN DOES IT EXPIRE: _____

IF NO, HAVE YOU APPLIED FOR THE TWIC CARD: YES / NO IF YES, WHAT DATE DID YOU APPLY: _____

ARE YOU WILLING TO TAKE A DRUG SCREEN (circle one): YES / NO

IF NO, PLEASE EXPLAIN: _____

PHYSICAL REQUIREMENTS:

ARE YOU WILLING TO TAKE A PHYSICAL EXAM (circle one): YES/NO

IF NO, PLEASE EXPLAIN: _____

CAN YOU STAND: YES / NO IF NO, PLEASE EXPLAIN: _____

CAN YOU LIFT 50+ POUNDS OR MORE: YES / NO IF NO, PLEASE EXPLAIN: _____

CAN YOU CLIMB A LADDER: YES / NO IF NO, PLEASE EXPLAIN: _____

WHAT IMPAIRMENT DO YOU HAVE: _____

CRIMINAL HISTORY:

HAVE YOU EVER BEEN CONVICTED OF A FELONY: YES / NO

IF YES, PLEASE EXPLAIN: _____

HOW MANY FELONY CONVICTIONS: 1 2 3 4 5+

DID YOU RECEIVE PROBATION: YES / NO IF YES, WHAT DATE DID YOU COMPLETE PROBATION: _____

ARE YOU CURRENTLY ON PROBATION: YES / NO IF YES, WHEN WILL YOU COMPLETE PROBATION: _____

DID YOU RECEIVE PAROLE: YES / NO IF YES, WHAT DATE DID YOU COMPLETE PAROLE: _____

HOW MANY MISDEAMENOR CONVICTIONS: 1 2 3 4 5+ DID YOU RECEIVE PROBATION: YES / NO

IF YES, WHAT DATE DID YOU COMPLETE PROBATION: _____

DO YOU HAVE ANY OCCUPATIONAL / JOB SKILLS: _____

DO YOU HAVE ANY PROFESSIONAL LICENSURE / CERTIFICATIONS: _____

WORK REFERNCES (NAME & CONTACT INFORMATION): _____

ARE YOU LEGALLY ABLE TO WORK IN THE UNITED STATES OF AMERICA: YES / NO

HOW DID YOU HEAR ABOUT JESUS IS ALPHA AND OMEGA (CIRCLE ONE):

TELEVISION / RADIO / NEWSPAPER / FLYER / WORD OF MOUTH / WORK FORCE SOLUTIONS / URBAN LEAGUE / FACEBOOK / WEB-SITE: _____
FRIEND: _____ / CHURCH: _____

NAME OF ASSESOR / INTERVIEWER:

ASSESSOR'S NOTES: _____

DECLARATION

I UNDERSTAND THAT THE ASSISTENCE PROVIDED BY JAOM IS EXCLUSIVELY RELIGIOUS/SPIRITUAL IN NATURE AND IS NOT SUBJECT TO LICENSURE OR REGULATION BY THE TEXAS COMMISSION ON ALCOHOL AND DRUG ABUSE. JAOM ONLY OFFERS ME NON-MEDICAL ASSISTENCE AND RECOVERY METHODS SUCH AS PRAYER, MORAL GUIDANCE, SPIRITUAL COUNSELING AND SPIRITUAL STUDY. I PROVIDE ALL OF THE INFORMATION ABOVE FREELY AND WILLINGLY, IN ORDER THAT JAOM CAN BEST ASSIST ME BOTH SPIRITUALLY, AND IN FINDING POTENTIAL EMPLOYMENT OPPORTUNITIES. I CETIFY THAT MY ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. IF THIS APPLICATION LEADS TO EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION IN MY APPLICATION OR INTERVIEW MAY RESULT IN MY RELEASE.

SIGNATURE: _____ **DATE:** ____/____/____