



Main Office  
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Goshen IN 46528  
Phone (574) 533-4450  
Fax (574) 533-4399  
www.lacasainc.net

**Instructions:** Please enter your answers in the fields provided, then print this application and submit it to [hr@lacasainc.net](mailto:hr@lacasainc.net), fax it, or drop it off at our office.

## LACASA, INC APPLICATION FOR EMPLOYMENT

Lacasa, Inc. is an equal opportunity employer. LaCasa of Goshen, INC, DBA as Lacasa, Inc. does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

## OUR MISSION STATEMENT

Lacasa works with individuals and community partners to create opportunities for personal empowerment, family stability, and neighborhood vitality.

## PERSONAL INFORMATION

Name	Date	
Email Address		
Mobile Phone #		
Can you work some overtime, including some weekends?	Yes	No
Are you eligible to work in the U.S.?	Yes	No
Are you at least 18 years or older?	Yes	No
Are you able to perform the essential functions of the job with or without a reasonable accommodation?	Yes	No

## EMPLOYMENT DESIRED

Date you can start	Hourly rate/salary desired	
Position desired		
Are you currently employed?	Yes	No

Do you have any special skills, experience, and/or training that would enhance your ability to perform the position applied for? If yes, explain Yes      No

How do you identify with Lacasa's Mission Statement?

**REFERRAL SOURCE**

How did you hear about us?	Walk-in	Social Media	Referral	Other
Have you worked for us before?	Yes	No		

**EDUCATION**

See attached Resume

Schools Attended	Degree Received	Subjects Studied/Major
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**EMPLOYMENT/WORK EXPERIENCE** Start with your present or most recent position.

See attached Resume

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title	Summarize nature of work performed and job responsibilities		
Reason for leaving			
From	To	Employer	Telephone
Job Title		Address	

Immediate supervisor and title      Summarize nature of work performed and job responsibilities

Reason for leaving

From                      To                      Employer                      Telephone

Job Title                      Address

Immediate supervisor and title      Summarize nature of work performed and job responsibilities

Reason for leaving

From                      To                      Employer Name                      Telephone

Job Title                      Address

Immediate supervisor and title      Summarize nature of work performed and job responsibilities

Reason for leaving

**REFERENCES**

Give the names of three people not related to you, whom you have known for at least three (3) years.

[ ] See attached Resume

	Name	Phone Number/Email	Company	Years Acquainted
1				
2				
3				

**Please read carefully before signing**

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Lacasa, Inc. to hire me. If I am hired, I understand that either Lacasa, Inc. or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Lacasa, Inc. has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Lacasa, Inc. true and complete information on this application. No requested information has been concealed. I authorize Lacasa, Inc. to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date

Signature

**THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.**