

NPC is the Northside Planning Council
NPC/FEED Bakery Jobs Training Program Application
(No answer will disqualify you, please be Honest in your responses)

General Information

First Name: _____ Last Name: _____ Middle: _____

Current Address: _____

Telephone: Home: _____ Cell: _____ Work: _____

Date of Birth: ____/____/____ Age: _____ Gender: ____ Female ____ Male

Race/Ethnicity* _____

Are you a United States citizen? Yes ___ No ___

If no, are you legally entitled to work in the United States? Yes ___ No ___

Have you ever served in the armed forces? Yes ___ No ___

Why are you applying to this training program? _____

Referral

Who referred you to FEED?

Name _____ Agency: _____

Relationship _____ (for example, case manager, sponsor, friend)

Housing/Transportation/Access

1) Do you have a stable living arrangement while you will be attending this class? Yes ___ No ___

2) Will you have dependable transportation while attending this class (car, bus, bike, family, friend)?

Yes ___ No ___

3) Will you be accessible by phone during the class session?

Yes ___ No ___

Physical Requirements

1) The bakery training program requires you to be able to lift 50 lbs. and be on your feet for long periods of time (6 – 8 hours per day). Do you have a condition or disability that would limit your ability to meet these physical requirements? Yes ___ No ___

If Yes, please explain: _____

2) Students are required to report to class and any training program events drug and alcohol free. If a student is found to be under the influence during training or sponsored events, they will be immediately terminated from the course. Do you understand this requirement? Yes ___ No ___

Educational History

Please provide a summary of your educational history to include High School, and any post high school vocational, college or other training programs:

Employment History

Please list your work experience in the following charts. Start with the last job you held.

Name of Employer:	Supervisor's Name	From:	To:
Job or Job title:			
Describe the jobs you held, duties performed, skills used:			
Reason for leaving:			

Name of Employer:	Supervisor's Name	From:	To:
Job or Job title:			
Describe the jobs you held, duties performed, skills used:			

Reason for leaving:

Please give details of any food service training or experience you have had:

Legal History

Do you have any warrants, upcoming court dates or legal problems? Yes ___ No ___

Are you on probation, parole or work release? Yes ___ No ___

If yes to either or both, please explain:

Have you ever been convicted of a felony? Yes ___ No ___

The charge/s? _____

If yes, explain when and why:

Have you ever been convicted of a sexual offense? Yes ___ No ___

If yes, explain when and why:

Acknowledgement of NPC/FEED Bakery Program Requirements

Listed below are some of the Training Program requirements: Please initial after each one if you agree to them.

- 🍏 I understand that daily attendance is required. _____
- 🍏 I understand that I am required to remain drug and alcohol free. _____
- 🍏 I understand that I must be on time and prepared to stay the entire day. _____
- 🍏 I understand that I must be willing to accept instruction from my instructors and supervisors and complete the work that is assigned to me with a positive attitude. _____
- 🍏 I understand that I must have a willingness to confront my personal challenges and/or barriers. _____
- 🍏 I understand that NPC/FEED Bakery is not responsible for damage, loss or theft of my personal property. _____

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give NPC/FEED Bakery permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release NPC/FEED Bakery from any liability as a result of such contract.

I also understand that:

- (1) The NPC/FEED Bakery has a drug and alcohol policy that provides for random and causal testing before and/or during the program;
- (2) I consent to and am in compliance with such policy at the time of my enrollment; and
- (3) My continued enrollment is based on the successful passing of testing under such policy.

Applicant's signature: _____ Date: ____ / ____ / ____

Sponsor/Service Provider's signature: _____ Date: ____ / ____ / ____

NPC/FEED Bakery Release & Authorization Form

I (Applicant/Student), _____, do hereby authorize NPC/FEED Bakery's Job Training Staff to release any and all information about my case, including but not limited to, records of my communications, my attendance and behavior in the Bakery Job Training Program, and information provided in Personal Life Contract Sessions with staff to: (agency, case manager, parole or probation officer)

_____.

This release of information shall expire on one year of the date of signature on this form, unless revoked by me in writing at an earlier date. In addition, I hereby release NPC/FEED Bakery and its officers, directors, employees, volunteers, from any claims arising out of the release of the information, photos, news releases, films or videos, described herein.

I (Applicant/Student name), _____, do hereby authorize (agency, case mgr, parole or probation officer) _____ to release any and all information about professional services I have received from (agency, case mgr, parole or probation officer) since (date of service/relationship) _____, including but not limited to, records of appointments, diagnostic information, course of treatment to NPC/FEED Bakery for the purpose of

_____.

This release of information shall expire in one year of date of signature on this form, unless revoked by me in writing at an earlier date. I understand that I have the right to inspect the records described herein. In addition, I hereby release (agency, case mgr, parole or probation officer), _____ its officers, directors, and employees from any claims arising out of the release of the information described herein.

In addition, I hereby release NPC/FEED Bakery and its officers, directors, employees, volunteers, from any claims arising out of the release of the information, photos, news releases, films or videos, described herein.

Applicant / Student Signature:

Date: ____ / ____ / ____

NPC/FEED Bakery Job Training Staff's Signature:

Date: ____ / ____ / ____