

QUINN DEVELOPMENTAL SERVICES  
**Independent Business Application & Agreement**

**FIELD ASSOCIATE APPLICATION**

\_\_\_\_\_  
Last Name                      First (formal)                      Nickname (informal 1<sup>st</sup>)                      Middle Intl                      Date of Birth                      Social Security #

\_\_\_\_\_  
Resident Address (not PO Box) Street                      City,                      State                      Zip

Resides within 20 minutes drive of QDS regional office?                       Yes                       No

(\_\_\_\_\_) \_\_\_\_\_                      (\_\_\_\_\_) \_\_\_\_\_  
Home Phone                      Mobile Phone                      Personal E-mail

Gender:  Male                       Female                      Marital Status:  Single                       Married (Spouse's Name : \_\_\_\_\_)

List any other names (i.e. maiden, alias, etc) used in the past: \_\_\_\_\_

**EDUCATION (highest level completed):** list details on lines provided

- High school graduate/GED
- Bachelor's degree – Where? \_\_\_\_\_
- Post-graduate or professional degree – What in and Where? \_\_\_\_\_
- Specialized 'Behavioral or Educational' training/instruction – Where? \_\_\_\_\_
- Masters Degree in ABA approved program?  Yes                       No                      When/Where? \_\_\_\_\_

**RESIDENCE INFORMATION:** for last 5 years (no gaps or missing time periods).

From: \_\_\_\_ (mo./ yr.) To: \_\_\_\_ (mo./ yr.) \_\_\_\_\_  
Address (do not use PO Box) : # Street, City, State, Zip

From: \_\_\_\_ (mo./ yr.) To: \_\_\_\_ (mo./ yr.) \_\_\_\_\_  
Address (do not use PO Box) : # Street, City, State, Zip

**EMPLOYMENT HISTORY:**

Resume with detailed previous employment for last 5 years attached?  Yes                       No                      (if no, attach written details)

**LICENSES & CERTIFICATIONS:**

List all licenses and/or certifications you have that might be related to education or special education field.

\_\_\_\_\_  
BCBA certification current?  Yes                       No                      When obtained and last renewed? \_\_\_\_\_

**PERSONAL REFERENCES:**

List 4 personal references we can contact that are unrelated to you, at least 2 prior business/work colleagues.

\_\_\_\_\_  
Prof/Personal                      Full Name                      City/State                      Best Phone #

\_\_\_\_\_  
Prof/Personal                      Full Name                      City/State                      Best Phone #

\_\_\_\_\_  
Prof/Personal                      Full Name                      City/State                      Best Phone #

\_\_\_\_\_  
Prof/Personal                      Full Name                      City/State                      Best Phone #

**SELF-EMPLOYMENT RELATED RESOURCES:**

Do you have a reliable and legally licensed and insured vehicle (Car) available for work?                       Yes                       No

Do you have daily access to a mobile phone, internet browsing, & email for communications?                       Yes                       No

Have access and knowledgeable use of a portable computer with Macintosh Operating System?                       Yes                       No  
(relevant to a Behavior Consultant role only)

**CONFLICTS OF INTEREST:**

Certain business activities in which you may already be involved may raise legal issues, or simply require special arrangements in order for you to become contracted with the QDS Company. Some of these activities are:

1. Soliciting, promoting, trading, analyzing or providing service(s) related in any way to: (i) behavior intervention advice, (ii) behavior analysis, (iii) behaviorally related group training or group instruction, (iv) educationally related group training or group instruction, or (v) any other psychological, behavioral, or educational product or service.
2. Acting in any role or capacity as a: behavior consultant/specialist/analyst, education specialist, psychologist, psychiatrist, child/family counselor, child-care/babysitter for anyone with special needs, or any other role or capacity that might have some similarity to the products/services of the QDS Company.
3. Having any kind of personal or professional relationship with an individual, family, and/or organization (i.e. school district, school, daycare, Intermediate Unit, etc.) which may already have a contracted relationship with QDS?

Are you engaged now, or may become engaged at a future date while outside of a professional relationship with QDS, with any of the above activities (i.e. employee for, Associate representing, contract with, etc)?

Yes  No

If "Yes", please state the capacity in which you are involved and the nature of your responsibilities. \_\_\_\_\_

**APPLICANT'S BACKGROUND INFORMATION:**

A conviction at any time, or a conviction within the last 10 years, may likely make you ineligible, and/or possibly make it illegal under law for you to represent QDS. Certain acts of fraud or dishonesty may make you ineligible. If you have a criminal record, full and complete disclosure of the details regarding the record is required. You, not QDS, have the burden of demonstrating that you are not disqualified to engage in any QDS business. Of course, QDS may elect for other business reasons not to contract with an applicant who has a criminal record. Inaccurate or incomplete information is a basis at any time for the termination your relationship QDS. If you answer "yes" to any question 1-4 below, you must submit an added form explaining incident(s) in detail, and include all related certified court documents.

1. Have you ever been charged with, convicted of, pled guilty or nolo contendere ("no contest") to a felony or misdemeanor (other than a minor traffic violation)?  Yes  No
2. Are you now, or have you ever been, the subject of any inquiry involving allegations against you of child abuse, rape, assault, fraud, breach of trust, theft, misrepresentation, or dishonesty?  Yes  No
3. Have you ever been denied a trade or professional license, or had a trade or professional license revoked, suspended or restricted?  Yes  No
4. Have you ever been discharged or permitted to resign from any contract, position or employment because you were accused of wrongdoing?  Yes  No

**APPLICANT'S DESIRED STARTING ROLE/SUPPORT COMMITMENT:** *(initial at least one of the choices)*

**FULL-TIME FIELD SPECIALIST**
 **FULL-TIME BEHAVIOR CONSULTANT**  
 **PART-TIME FIELD SPECIALIST**
 **PART-TIME BEHAVIOR CONSULTANT**

Put an "NA" in the daily period you are currently NOT available to provide contracted support

	SUN	MON	TUE	WED	THU	FRI	SAT
7:30am- 3:00pm							
8:30am-3:45pm							
evenings							