

## EMPLOYMENT APPLICATION

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's license #: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

How long have you resided at your current address \_\_\_\_\_

Have you ever been employed by this facility? \_\_\_\_\_ If yes, When? \_\_\_\_\_

Reason for leaving this facility: \_\_\_\_\_

Do you have family members (including in-laws) currently employed at this location? \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_, if no, are you lawfully employable in the United States? \_\_\_\_\_

Are you over the age of 18? \_\_\_\_\_

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodations? \_\_\_\_\_

Do you require any reasonable accommodation to assist you in completing the application process? \_\_\_\_\_

If yes, please describe the reasonable accommodation required: \_\_\_\_\_

Have you ever been convicted of a crime other than a minor traffic violation? Yes No

Please note a DUI is a criminal offense. Any "first offender" or "youth" court conviction, plea bargain or a plea of *no lo contendre* to any crime is considered a guilty disposition. If you have

been convicted of a crime, please tell what, when, where, and the disposition of the case. Every criminal conviction must be accurately and completely disclosed below. Please request an additional sheet if necessary. Failure to disclose all criminal convictions on this form could determine an employment decision.

What	When	Where(City, State)	Disposition

Have you ever been asked to resign or discharged from employment? \_\_\_\_\_

If yes, please explain \_\_\_\_\_  
 \_\_\_\_\_

Have you ever worked under or been known by another name? \_\_\_\_\_

If yes, please list your names for reference checks. \_\_\_\_\_  
 \_\_\_\_\_

**What position do you seek with this location? Please circle only one.**

- |                               |                                    |                               |
|-------------------------------|------------------------------------|-------------------------------|
| Accountant                    | Chaplain                           | Nurse Practitioner            |
| Accounts Payable Clerk        | Collections Specialist             | Payroll Clerk                 |
| Accounts receivable Clerk     | Consultant                         | Pharmacist                    |
| Activity Director             | Cook                               | Pharmacy Technician           |
| Administrative Assistant      | Dietician                          | Physical Therapist            |
| Administrator                 | Director                           | Regional Director             |
| Admissions Coordinator        | Education Coordinator              | Registered Nurse              |
| Admissions Specialist         | Environmental Services Consultant  | Rehabilitation Coordinator    |
| Assistant Administrator       | Financial Analyst                  | Risk Manger                   |
| Assistant Director of Nursing | Healthcare Services Representative | Staff Development Coordinator |
| Bookkeeper                    | House Keeping Aide                 | Vice President                |
| Case Manager                  | Licensed Practical Nurse           | Other _____                   |
| Case Mix Director             | Maintenance Assistant              |                               |
| Certified Nurse Assistant     | Manager                            |                               |

Please note we are a **24 hour**, 7 day a week facility.

Please list your available hours.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

What is the wage or salary you are expecting? \_\_\_\_\_

What is your most recent wage or salary you have earned? \_\_\_\_\_

List all languages you are able to speak, read, and write fluently \_\_\_\_\_

Do you have a high school diploma? \_\_\_\_\_

Do you have a college or university degree? \_\_\_\_\_, If yes, what kind of degree did you earn?

Do you have any professional certifications or licenses? \_\_\_\_\_, if yes, please list. \_\_\_\_\_

If selected for hire, when would you be able to start your employment with our facility? \_\_\_\_\_

Please list the following information about your two most recent employers:

**Employer 1:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Your Position: \_\_\_\_\_

Time Employed: Years \_\_\_\_\_ Months \_\_\_\_\_

Year Employment Began: \_\_\_\_\_

Reason for Termination: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone #: \_\_\_\_\_

**Employer2:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Your Position: \_\_\_\_\_

Time Employed: Years \_\_\_\_\_ Months \_\_\_\_\_

Year Employment Began: \_\_\_\_\_

Reason for Termination: \_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone #: \_\_\_\_\_

We contact past employers as part as our reference check procedure. Is there anything you wish to disclose before we contact recent employers? \_\_\_\_\_

\_\_\_\_\_

Please list four professional references. Do not use family or friends as professional references. If you cannot list professional references, explain why.

\_\_\_\_\_

**Name 1:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Time Known: Years \_\_\_\_\_ Months: \_\_\_\_\_

Telephone #: \_\_\_\_\_

**Name 2:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Time Known: Years \_\_\_\_\_ Months: \_\_\_\_\_

Telephone #: \_\_\_\_\_

**Name 3:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Time Known:** Years \_\_\_\_\_ **Months:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_

**Name 4:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Time Known:** Years \_\_\_\_\_ **Months:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_

I hereby authorize the location to investigate all information given in this application and specifically to obtain information concerning me from prior employers and from any person listed as a reference. I certify the information given on this application is correct. I understand and agree if the location extends a conditional offer of employment, investigative background inquiries will be conducted. The background inquiries may include but are not limited to the following: previous employment verifications, educations verification, professional certification verification, criminal background checks, Social Security Number trace reports, and OIG/GSA sanctioned searches. I understand a job offer can be rescinded or employment terminated based upon the results of the investigation background inquiries. I understand the location or its authorized agent requests information from various federal, state, and other agencies that maintain records concerning my past activities relating to my driving, criminal, civil, and other experiences.

The location may require job applicants to undergo testing for the presence of illegal drugs as a condition of employment. Any applicant with a confirmed positive test will be denied employment. Applicants who refuse to submit to the location's substance abuse testing procedures will not be considered for employment. By signing the application form, the applicant hereby consent to the administration of any drug tests and hereby release the location from any and all liability and damage related thereto.

I understand a job offer can be rescinded if it is determined I cannot perform the essential functions of the job with or without reasonable accommodation, or that I pose a direct threat to the health or safety of others or myself in the workplace. I further understand the location will make reasonable efforts to accommodate a covered disability to the full extent of the law. I also understand all medical or disability related information supplied by or concerning me will be held in strict confidence by the location, subject to certain disclosures permitted by applicable law.

If employed, I agree to comply with all rules and regulations of the location in effect now and any others that may be instituted at a later date. I understand if employed, I will be employed on an at-will basis and may be terminated for any reason or no reason at the option of the location or myself.

**Signature of Applicant** \_\_\_\_\_

**Date of Signature** \_\_\_\_\_