

Application for Employment



605-842-0390
daybreakvillageinc.com

Personal Information (Please Print)

Full Name:	<input type="text"/>	Date of Birth:	<input type="text"/>
Address:	<input type="text"/>		
Email:	<input type="text"/>	Phone:	<input type="text"/>
Social Security Number	<input type="text"/>		

Position Information

Position Applied For:	<input type="text"/>
Work Hours	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Weekends <input type="checkbox"/> Holidays
Date Available to Start:	<input type="text"/>

Educational Background

Degree	Institution	Year of Completion
High School	<input type="text"/>	<input type="text"/>
College (Post)	<input type="text"/>	<input type="text"/>

Employment History

Company Name	Job Title	Responsibilities	Work Duration
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Professional background

Company Name	Job Title	Responsibilities	Work Duration
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Attachments: ☐ Resume/CV Attachment ☐ Other

Declaration:

By submitting this application, I confirm that the information provided is accurate, and I understand that any false statements may disqualify me from employment.

Signature



Application for Employment



605-842-0390
daybreakvillageinc.com

References (3 persons not related to you whom you have known at least 1 year)

Name	Address	Phone

Authorization

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed falsified statements on this application shall be grounds for dismissal.

I authorize the investigation of all statements contained herein and the references and employer listed above to give any and all information concerning my previous employment and any pertinent information they may have personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment if such reports are required. I understand that in compliance with federal law, the company will provide me with written notice of the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment.

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Signature

Date

