



COBALT HEALTH CARE AND
REHABILITATION CENTER

Application for Employment

Name: _____

Address: _____

Street

City

State

Zip Code

Phone Number: _____ SSN: _____

EMPLOYMENT DESIRED

Position: _____ Date Available to Start: _____ Salary Desired: \$ _____

Have you ever applied to this company before? __ Yes __ No If so, when: _____

EDUCATION

Name & Address of School:	Years Attended:	Degree:

FORMER EMPLOYMENT

Name of Employment:	Position:	Dates Employed:	Reason for Leaving:
1.			
2.			
3.			

PERSONAL REFERENCES

Name:	Phone Number:	Relationship:	Years Known:
1.			
2.			
3.			



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Application for Employment Continued

PLEASE ANSWER THE FOLLOWING QUESTIONS TRUTHFULLY:

***Note:** A false answer to questions 2 through 4 below by any person seeking employment in a position connected with the provision of care in a nursing home is a Class A Misdemeanor under Connecticut law.*

1. Do you have any disabilities that would prevent you from performing the essential functions of the position you are applying for? Yes ___ No___ If yes, please explain: _____
2. Have you ever been convicted of a felony? Yes___ No___
3. Have you ever been convicted of cruelty to persons or assault of a victim 60 or older? Yes___ No___
4. Have you ever been subject to any decision imposing disciplinary action by the licensing agency in any state, District of Columbia, US possession or territory or foreign jurisdiction? Yes___ No___
5. Are you Authorized to perform work in this country? Yes___ No___

I, _____, authorize Cobalt Health Care & Rehabilitation Center to conduct a criminal background investigation using all statements contained within this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may be terminated at any time without previous notice, regardless of the date of payment of my wages and salary.

Signature

Date

**DO NOT WRITE BELOW THIS LINE
INTERNAL USE ONLY**

Date of Interview: _____

Department: _____

Interviewed By: _____

Position: _____

Hired: Yes___ No___

Job Application Complete: Yes___ No___

Start Date: _____

Wages: _____

Department Head Signature: _____