



Warm Valley Health Care

EMPLOYMENT APPLICATION

Name of Job Applicant

Date

NOTICES TO JOB APPLICANT

EQUAL OPPORTUNITY

The ESTHP endeavors to provide an environment at its facilities wherein Human Dignity prevails and all employees and applications for employment receive equal consideration and treatment. No person is granted special privileges or consideration nor is employment or any benefits arising out of employment given or withheld because of race, creed, color, national origin, or because of age or sex. The ESTHP is an Affirmative Action employer in the hiring of Veterans, Handicapped, and Indian Preference.

DRUG TESTING

All job offers are contingent dependent on drug testing, reference checks and criminal background checks upon passing, to the satisfaction of Warm Valley Health Care.

VALID WY DRIVER LICENSE

If the job being applied for requires the driving of a company vehicle, all job offers are conditional upon the applicant providing a valid Wyoming driver's license.

LICENSING

If the job being applied for requires the employee to hold a license or certificate, then the job offer is conditional upon the applicant providing proof of proper licensing or credentialing.

MISREPRESENTATIONS

Warm Valley Health Care is relying on the information that you provide on this application, in the documents you provide to Warm Valley Health Care, and during any interview(s). You must complete application fully to be considered for a job. If you knowingly make any misrepresentation or omission, your application and any job offer may be withdrawn; and, if falsehood is not discovered until after you are employed, then your employment may be terminated for lack of honesty at any time after your employment begins.

STALE APPLICATIONS

This Application is only current for one (1) year. If you are not hired within one (1) year, a new application will have to be completed in order to be considered for employment.

[This is a Cover Sheet to protect privacy. Application questions begin on the next page.]

(Please Print)

First Name		Middle Name		Last Name	
Street Address		City		State	Zip
Mailing Address (if different from above)		City		State	Zip
List other names used in past:					
Home Phone:		Cell Phone:		Date of Birth:	
List the position are you applying for:					
Can you provide proof of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, can you provide proof of your legal authorization to work as a minor? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Have you ever been convicted by any court of a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever received a Dishonorable Discharge from the armed services? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you currently out on bail or on your own recognizance pending a trial? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>You need not list minor traffic violations for which the fine was \$500 or less or any offense that does not have to be disclosed to the potential employers by law, such as a misdemeanor marijuana offense over two years old or sealed or expunged criminal files. If your answer is yes, list all offenses on the back of the application giving date, location, nature, and disposition for each. A conviction will not necessarily disqualify you from a job.</i>					
If you are applying for a position that requires you to drive a vehicle on public roads, has your driver's license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If your answer is yes, list all offenses on the back of the application giving date, location, nature, and disposition for each offense. You need not list offenses that are sealed or expunged. A suspension or revocation will not necessarily disqualify you from a job.</i>					
Have you ever worked here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list dates? _____					
Date first available for work:			Asking wage:		
How did you learn about us? <input type="checkbox"/> Ad <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Referred by _____					

Employment Experience -- List your present to last job. If you need additional space, please continue on a separate sheet of paper.

Employer Name:				
Address:		City:	State:	Zip:
Telephone Number:				
Dates Employed:	Starting:		Ending:	
Wage Rate:	Starting:		Ending:	
Job Title:			Supervisor's Name:	
Job Duties:				
Describe any specialized training, apprenticeship, or skills you received at this job:				
Reason for Leaving:				

Employer Name:				
Address:		City:	State:	Zip:
Telephone Number:				
Dates Employed:	Starting:		Ending:	
Wage Rate:	Starting:		Ending:	
Job Title:			Supervisor's Name:	
Job Duties:				
Describe any specialized training, apprenticeship, or skills you received at this job:				
Reason for Leaving:				

Employer Name:		
Address:	City:	State: Zip:
Telephone Number:		
Dates Employed:	Starting:	Ending:
Wage Rate:	Starting:	Ending:
Job Title:		Supervisor's Name:
Job Duties:		
Describe any specialized training, apprenticeship, or skills you received at this job:		
Reason for Leaving:		

Explanation of Gaps in Employment – Please explain why you were not employed if there are gaps in your employment history.

<hr/>

Education – List your education, starting with high school. Start with the last school you attended if you did not graduate from high school.

Name of School:	Last Grade Completed:
Type of School: <input type="checkbox"/> Elementary <input type="checkbox"/> Jr High <input type="checkbox"/> High School <input type="checkbox"/> Trade <input type="checkbox"/> College <input type="checkbox"/> Post Graduate	
Location of School:	
Diploma / Degree Earned: <input type="checkbox"/> General <input type="checkbox"/> GED <input type="checkbox"/> Other (describe):	
Describe Course of Study:	
*Describe any specialized training, skill building, or apprenticeship activities you engaged in:	
*Describe any honors you have received:	

Name of School:	Last Grade Completed:
Type of School: <input type="checkbox"/> Elementary <input type="checkbox"/> Jr High <input type="checkbox"/> High School <input type="checkbox"/> Trade <input type="checkbox"/> College <input type="checkbox"/> Post Graduate	
Location of School:	
Diploma / Degree Earned: <input type="checkbox"/> General <input type="checkbox"/> GED <input type="checkbox"/> Other (describe):	
Describe Course of Study:	
*Describe any specialized training, skill building, or apprenticeship activities you engaged in:	
*Describe any honors you have received:	

Name of School:	Last Grade Completed:
Type of School: <input type="checkbox"/> Elementary <input type="checkbox"/> Jr High <input type="checkbox"/> High School <input type="checkbox"/> Trade <input type="checkbox"/> College <input type="checkbox"/> Post Graduate	
Location of School:	
Diploma / Degree Earned: <input type="checkbox"/> General <input type="checkbox"/> GED <input type="checkbox"/> Other (describe):	
Describe Course of Study:	
*Describe any specialized training, skill building, or apprenticeship activities you engaged in:	
*Describe any honors you have received:	

Relatives and Friends - List the names of all of your relatives and friends currently working for us. No one will be discriminated against solely for having relatives or friends working for us. However, we have a policy prohibiting an employee from supervising or being supervised by a relative or romantic partner. In addition, supervisors cannot date or be involved in romantic relationships with subordinates. If the job you are applying for would violate one of our policies, it could disqualify you from being hired.

--

References – Please provide three references that can provide information about your work skills and work habits.

Name:	Phone Numbers
Address:	Work:
Place of Employment:	Home:
Current or Past Relationship: <input type="checkbox"/> Supervisor <input type="checkbox"/> Co-Worker <input type="checkbox"/> Friend <input type="checkbox"/> Other (specify):	

Name:	Phone Numbers
Address:	Work:
Place of Employment:	Home:
Current or Past Relationship: <input type="checkbox"/> Supervisor <input type="checkbox"/> Co-Worker <input type="checkbox"/> Friend <input type="checkbox"/> Other (specify):	

Name:	Phone Numbers
Address:	Work:
Place of Employment:	Home:
Current or Past Relationship: <input type="checkbox"/> Supervisor <input type="checkbox"/> Co-Worker <input type="checkbox"/> Friend <input type="checkbox"/> Other (specify):	

Special Skills and Qualifications – Provide any additional information, such as special skills and qualifications not already mentioned, that you feel may be helpful in considering your application.

<hr/> <hr/> <hr/>

APPLICANT'S SIGNATURE

I hereby state that the information provided by me in this application is true and accurate. I also state that I am fully qualified and able to perform the job being applied for, except as I have written above.

Sign: _____ Date: _____

Separate Authorization for Release of Information and Waiver of Potential Claims

To Whom It May Concern:

I am applying for a job at Warm Valley Health Care located at
29 Black Coal Dr. Fort Washakie WY 82514 and whose phone number is
(307)335-5930(hereinafter, "Company").

I hereby authorize the Company to contact the references, past employers, schools, and training institutions listed in the Employment Application (and my resume) or any other person or entity that may have information about my (1) prior employment, or (2) educational experiences, or (3) statements contained in this Application.

I hereby authorize any references, past employers, schools, and training institutions listed in my Employment Application (and my resume) to release to the Company all information about my (1) prior employment, or (2) educational experiences, or (3) statements contained in the Employment Application (and my resume). I hereby waive any potential claim that I may have against any references, past employers, schools, and training institutions listed in my Employment Application (and my resume), and their employees, officers, and directors, for providing information about me to the Company.

I hereby agree to waive any claim that I may have against the Company and to defend and hold the Company harmless from any and all claims that may arise from the Company contacting any person or entity described in this release.

A copy or facsimile of this Authorization may be treated and relied upon as if it were an original.

Applicant's Signature

Date