

APPLICATION FOR EMPLOYMENT

Mount St. Joseph 24955 N. US Hwy 12 Lake Zurich IL, 60047

Mount Saint Joseph. is an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status or sexual orientation, veteran status, the presence of a medical condition or disability unrelated to the ability to perform with or without a reasonable accommodation, or any other legally protected status under applicable law

Pl	ERSONAL INFORMAT	ΓΙΟΝ
Name		
Last	First	Middle
AddressNumber		Street
City	State	Zip Code
Phone Number ()	Email	
I	EMPLOYMENT DESIR	RED
Position Applying for	Full – Time [Part-Time
Hours Available	AM's PM	
Date Available	Desir	optional red Salary
EM	IPLOYMENT ELIGIBI	ILITY
If you are offered employment, will you be a	able to submit proof of your eligi	bility to work in the U.S? Yes No
Have you ever been convicted of or had price	or employment history of child at	ouse, neglect, or mistreatment? Yes No
Have you been convicted of a felony in the l If yes, to above 2 questions, please give deta		Yes No
(Such conviction may be relevant if job circumstances such as age at the time of the		atically disqualify you for employment. All e crime will be considered.)
Are you fully able, with or without reasonab applied? Yes No	le accommodation, to perform th	ne functions for the job or which you have
		the job for which you have applied, how would
1	REFERRAL INFORMA	ATION
Have you ever been employed or volunteere If yes, when?		Yes No No
How were you referred to us? Facility Sign Employee Other	Walk-InName of Employee	_

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	DID YOU GRADUATE?	COURSE OF STUDY	DEGREE/ CERT.
GRAMMAR SCHOOL		GRADUATE:	STODT	CLKI.
HIGH SCHOOL/GED				
COLLEGE				
GRADUATE SCHOOL				

Other Education or Special Training	

PRIOR EXPERIENCE

EMPLOYER NAME	ADDRESS	EMPLOYMENT DATES	SUPERVISOR'S NAME	REASON FOR LEAVING

TERMS OF EMPLOYMENT – PLEASE READ THE FOLLOWING CAREFULLY

I, the undersigned, state that all information given by me in this application is true to the best of my knowledge. I authorize Mount St. Joseph. (Herein called the Facility) to verify such information and to contact any reference given by me and release the Facility from any and all claims arising from such verification and reference efforts. Should I be employed by the Facility:

- 1. I agree that my employment may be contingent upon my meeting all placement considerations, including medical requirements.
- 2. I grant Mount St. Joseph permission to use my likeness, voice and/or words in television, radio, and video or in any form to promote activities at the facility.
- 3. I agree in the course of my affiliation with Mount St. Joseph, I may be dealing with confidential information, I agree to keep said information in the strictest confidence.
- 4. I understand and agree that an offer of employment, and my continued employment with the Facility, is contingent upon satisfactory proof of my authorization to work in the United States.
- 5. My employment may be terminated by the Facility at any time without advance notice, its only obligation being to pay wages or salary due to me. Without limitation, failure to abide by Facility rules and regulations, failure to pass any Facility physical examination and the falsification of any information given by me in this application will entitle the Facility to terminate my employment as permitted by law. I understand my employment is at-will, and I may be terminated at any time, with or without cause.
- I also understand that falsification of any information in connection with employment will be grounds for immediate termination regardless of when such falsification is discovered.

09/2022

These conditions apply to the application for employment at this time and apply also to any future positions I may hold at Mount Saint Joseph.

Signature of Applicant	Date
FOR OFFICE USE ONLY	
Date of Interview	
Date of Observation	
Location of Observation	