



**MBA Professional  
Recruiting LLC**

CONNECTING TALENT, SHAPING FUTURES.

## EMPLOYMENT APPLICATION

Please complete the entire application.

### 1. Employer Information:

Employer: MBA Professional Recruiting LLC  
Address: 17111 58th Ave NW  
City/State/ZIP: Stanwood, Washington 98292-5621  
Telephone: 425-231-9799  
Email Address: customerservice@mbapr23.com

It is the policy of MBA Professional Recruiting LLC to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

### 2. Applicant Information:

Applicant Full Name: \_\_\_\_\_  
First Name Middle Name Last Name

Home Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Number of years at this address: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_  
Evening phone: \_\_\_\_\_  
Mobile phone: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_  
Driver's License (State/Number): \_\_\_\_\_  
Email Address: \_\_\_\_\_

### 3. Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: \_\_\_\_\_  
First Name Middle Name Last Name

Relationship to you: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_  
Evening phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

4. Job Position Applied For:

NAC: \_\_\_\_\_ RN: \_\_\_\_\_ LPN: \_\_\_\_\_ Home Health Aide: \_\_\_\_\_

5. Salary Desired:

\$ \_\_\_\_\_ per \_\_\_\_\_ (hour, month, or year)

6. Referral:

Who referred you to our company? \_\_\_\_\_

Do you have any friends or relatives who work here? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list here:

\_\_\_\_\_

7. Previously Application:

Have you applied to our company previously? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, when? \_\_\_\_\_

8. Age:

Are you at least 18 years old? \_\_\_\_\_ Yes \_\_\_\_\_ No

9. Planned Transportation to Work:

How will you get to work? \_\_\_\_\_

10. Working Shifts:

Are you willing to work any shift, including nights and weekends? \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, please state any limitations:

\_\_\_\_\_

11. Overtime Work:

If applicable, are you available to work overtime? \_\_\_\_\_ Yes \_\_\_\_\_ No

12. Availability:

If you are offered employment, when would you be available to begin work?

\_\_\_\_\_

13. Eligibility for Employment:

If hired, are you able to submit proof that you are legally eligible for employment in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

14. Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation? \_\_\_\_\_ Yes \_\_\_\_\_ No

What reasonable accommodation, if any, would you request?

\_\_\_\_\_

## 15. Applicant's Skills

Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Ability or Skill	Years of Experience	Rating
[ ] Typing	_____	1 2 3 4 5
[ ] Answering telephones	_____	1 2 3 4 5
[ ] Filing Medical Document	_____	1 2 3 4 5
[ ] Customer service	_____	1 2 3 4 5
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5

## 16. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name: \_\_\_\_\_

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

First Name	Middle Name	Last Name
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Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties:

Reason for Leaving: \_\_\_\_\_

Dates of Employment:      From: \_\_\_\_\_      To: \_\_\_\_\_  
    MM/YYYY     MM/YYYY

Employer Name: \_\_\_\_\_

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

First Name	Middle Name	Last Name
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Address:

City/State/ZIP: \_\_\_\_\_

Job Duties:

Reason for Leaving: \_\_\_\_\_

[illegible]

Employer Name: \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_  
First Name Middle Name Last Name  
Address: \_\_\_\_\_  
City/State/ZIP: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
MM/YYYY MM/YYYY

#### 17. Applicant's Education and Training

College/University Name and Address

Did you receive a degree? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, degree(s) received:  
\_\_\_\_\_

High School/GED Name and Address

Did you receive a degree? \_\_\_\_\_ Yes \_\_\_\_\_ No

Other Training (graduate, technical, vocational):

\_\_\_\_\_

Please indicate any current professional licenses or certifications that you hold:

\_\_\_\_\_

Awards, Honors, Special Achievements:

\_\_\_\_\_

#### 18. Military Service:

Did you serve in the military? \_\_\_\_\_ Yes \_\_\_\_\_ No

Branch: \_\_\_\_\_

Specialized Training: \_\_\_\_\_

#### 19. References

List any two non-relatives who would be willing to provide a reference for you.

Name: \_\_\_\_\_  
First Name Middle Name Last Name

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

City/State/ZIP: \_\_\_\_\_

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

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

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_  
First Name Middle Name Last Name

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

City/State/ZIP: \_\_\_\_\_

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

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

Relationship: \_\_\_\_\_

20. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

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## **CERTIFICATION**

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize MBA Professional Recruiting LLC to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its CEO, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of MBA Professional Recruiting LLC, except in a specific written contract of employment signed on behalf of the organization by its CEO, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

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APPLICANT SIGNATURE

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DATE