## APPLICATION FOR EMPLOYMENT

## An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, gender, self-identified gender, age, marital status, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.									
Job Applied for Today's Date Are you seeking: Full-time Part-time Temporary employment? When could you start work?									
							κ?		
	Last Name First Name			Middle Name			Telephone Number		
	Present Street Addres	ss	City		State		Zip	Code	
STATE OF THE PERSON.	Are you 18 years of age or older (If you are hired, you may be require	r? ed to submit proof	of age.)				Yes	No 🗌	
	Social Security #	If hired,	, can you furnish	proof you are	eligible to we	ork in the U.S.?	Yes	No 🗌	
-	Have you ever applied here before	ore? Yes [	□ No □	If yes, when	?				
-	Were you ever employed here?	Yes [	No 🗌	If yes, when	?				
And in case of the last of the	Have you ever been convicted of plea of "guilty" or "no contest."	of any law violat Exclude minor	ion? Include any traffic violations	.)			Yes 🗌	No 🗌	
If yes, give details									
	If employed, do you expect to be or employment outside of our jo	be engaged in anob?	ny additional bus	iness			Yes 🗌	No 🗌	
	If yes, give details								
	Do you have a current professional						Yes	No 🗌	
	Professional Licensure			_ State Lice	ensed In				
	List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability or other protected status.)								
				Num	ber of	Diploma/	9,	ubjects	
	LIST NAME AND ADDRESS			Com	ears pleted	Degree/ Certificate		tudied	
	High School or GED:								
College or University:							-		
	Vocational or Technical:								
What skills or additional training do you have that relate to the job for which you are applying?									
What machines or equipment can you operate that relate to the job for which you are applying?									

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. if self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers. JOB TITLE AND DUTIES NAME OF EMPLOYER DATES OF EMPLOYMENT (MO/YR): FROM TO **ADDRESS** CITY, STATE, ZIP CODE FINAL \$ PAY: START \$ Reason For Leaving TELEPHONE SUPERVISOR(S) JOB TITLE AND DUTIES NAME OF EMPLOYER DATES OF EMPLOYMENT (MO/YR): FROM **ADDRESS** CITY, STATE, ZIP CODE FINAL \$ PAY: START \$ REASON FOR LEAVING SUPERVISOR(S) TELEPHONE JOB TITLE AND DUTIES NAME OF EMPLOYER TO DATES OF EMPLOYMENT (MO/YR): FROM ADDRESS CITY, STATE, ZIP CODE PAY: START \$ FINAL \$ REASON FOR LEAVING TELEPHONE SUPERVISOR(S) JOB TITLE AND DUTIES NAME OF EMPLOYER DATES OF EMPLOYMENT (MO/YR): FROM **ADDRESS** CITY, STATE, ZIP CODE FINAL \$ PAY: START \$ TELEPHONE BEASON FOR LEAVING SUPERVISOR(S) No T Have you worked or attended school under any other names? . . . . . . . . . Yes If yes, give names: Are you presently employed? . . . . . Yes If yes, whom do you suggest we contact?\_\_\_ Have you ever been fired from a job or asked to resign?.... Yes □ No  $\square$ If yes, please explain: \_\_\_ Give three references, not relatives or former employers. Phone Address Name PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required. If working with or in proximity to patients you will be required to take a TB test or chest x-ray to screen for communicable Tuberculosis.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a pre-employment physical examination to screen for any communicable diseases. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE, IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE. I have read, understand, and by my signature consent to these statements.

This application for employment will remain active for a limited time. Ask the Phoenician Hospice representative for details.