



Equal Opportunity: UHS offers equal opportunity to all qualified persons regardless of race, color, religion, age, marital or veteran status, sex, disability, national origin, or any other legally protected status.

PERSONAL INFORMATION

Form fields for personal information including: FULL NAME (LAST, FIRST, MIDDLE), DATE, PRESENT ADDRESS, CITY, STATE, ZIP, CELL PHONE, EMAIL, EMERGENCY CONTACT & PHONE, SOCIAL SECURITY #, DRIVER'S LICENSE # & STATE, ELIGIBILITY (Legal right to work in U.S., Age 18+)

POSITION & AVAILABILITY

Form fields for position and availability including: POSITION(S) APPLIED FOR, RATE OF PAY EXPECTED, AVAILABLE START DATE, TYPE (Full, Part, Temp), DAYS AVAILABLE (IF PART TIME) (M, T, W, Th, F, Sa, Su), SHIFT PREFERENCE (1ST / 2ND / 3RD), HOW DID YOU HEAR ABOUT UHS?

Day, shift, and hours are assigned based on company need without guarantee of permanency.

BACKGROUND & DISCLOSURES

Form fields for background and disclosures including: Related to anyone employed or supported by UHS?, IF YES - NAME, LOCATION, RELATIONSHIP, Previously applied to or worked for UHS?, IF YES - LOCATION AND DATES, Ever served in U.S. Armed Forces?, IF YES - BRANCH, DATES, HONORABLE DISCHARGE?, Ever convicted of a crime, or received alternative sentencing?, IF YES - CONVICTION, DATE, PLACE, Ever debarred / suspended from Federal Medicare or Medicaid?, IF YES - PLEASE EXPLAIN, Ever refused bond, or held a position of trust?, IF YES - REASON AND DATE

Disclosure does not automatically disqualify an applicant. Each event is evaluated individually based on time, circumstances, and relevance to the position.

EDUCATION

Form fields for education including: HIGH SCHOOL NAME & CITY, GRADUATED? (Yes, GED, No), YEAR COMPLETED (9-12), COLLEGE / UNIVERSITY, DEGREE / MAJOR, YEAR (1-4) / GRADUATED, ADDITIONAL SCHOOL / UNIVERSITY, DEGREE / MAJOR, YEAR (1-4) / GRADUATED, OTHER TRAINING, CERTIFICATIONS, OR LICENSES



PERSONAL REFERENCES (THREE REQUIRED)

At least one reference must have known you for five or more years. Do not list relatives.

1. NAME	PHONE	YEARS / MONTHS KNOWN
_____	_____	_____
2. NAME	PHONE	YEARS / MONTHS KNOWN
_____	_____	_____
3. NAME	PHONE	YEARS / MONTHS KNOWN
_____	_____	_____

PRIOR WORK RECORD

Please complete fully — do not write "See attached resume." Begin with the most recent position.

CURRENTLY EMPLOYED? Yes No REASON FOR SEEKING CHANGE

OTHER RELEVANT SKILLS, EXPERIENCE, OR QUALIFICATIONS

EMPLOYER 1 · MOST RECENT

EMPLOYER NAME & ADDRESS _____ PHONE _____

JOB TITLE & DUTIES _____ DATES (FROM - TO) _____ PAY (START / FINAL) _____

SUPERVISOR (NAME & TITLE) _____ REASON FOR LEAVING _____

EMPLOYER 2

EMPLOYER NAME & ADDRESS _____ PHONE _____

JOB TITLE & DUTIES _____ DATES (FROM - TO) _____ PAY (START / FINAL) _____

SUPERVISOR (NAME & TITLE) _____ REASON FOR LEAVING _____

EMPLOYER 3

EMPLOYER NAME & ADDRESS _____ PHONE _____

JOB TITLE & DUTIES _____ DATES (FROM - TO) _____ PAY (START / FINAL) _____

SUPERVISOR (NAME & TITLE) _____ REASON FOR LEAVING _____

EMPLOYER 4

EMPLOYER NAME & ADDRESS _____ PHONE _____

JOB TITLE & DUTIES _____ DATES (FROM - TO) _____ PAY (START / FINAL) _____

SUPERVISOR (NAME & TITLE) _____ REASON FOR LEAVING _____

