

Positions(s) applied for \_\_\_\_\_  
Date of Application: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Referred by: \_\_\_\_\_  
Date available for work \_\_\_\_\_



## Application for Employment

We, at Westminster Village, Inc. are committed to a policy of equal treatment and opportunity without regard to color, creed, religion, sex, national origin, age or marital status. This includes, but is not limited to: recruitment, hiring, and selection for training, transfer, promotion, rates of pay and other forms of compensation. Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

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**Please Print**

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

Address \_\_\_\_\_  
Street City State Zip Code

Telephone # ( ) \_\_\_\_\_ Mobile/Beeper/Other # \_\_\_\_\_ Social Security # \_\_\_\_\_

Have you ever been employed here before? \_\_\_\_\_ If so, when and in what capacity. \_\_\_\_\_

Are you legally eligible for employment in this country? Yes \_\_\_\_\_ No \_\_\_\_\_

Type of employment desired. Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary \_\_\_\_\_

Are you able to meet the attendance requirements of the position? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been bonded? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been convicted\* of a crime in the last seven (7) years? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
\*Conviction will not necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.

**SKILLS, QUALIFICATIONS & LICENSES**

List any licenses and/or certifications (i.e. RN, LPN, C.N.A., Food Handler's, Commercial Driving License) that may qualify you as being able to perform job-related functions in the position for which you are applying.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATIONAL BACKGROUND (IF JOB RELATED).**

School/College/University Course of Study Degree/Diploma

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any additional information you would like us to consider in reviewing your application:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EMPLOYMENT HISTORY

List complete employment history: (1) Begin with current or most recent position. (2) Include military experience that may relate to position for which you are applying. (3) Include all positions, regardless of their relation to the position for which you are applying. (4) Include dates of employment for past five (5) years only.

Employment Dates:				
From:	_____	To:	_____	( ) _____
	Mo. Year		Mo. Year	Employer (Company Name) Telephone Number
Full Name of Supervisor		Employer's Street Address		
Title of Position Held	City	State	Zip Code	
Summarize Job Duties:				
_____				
_____				
Circle one:	Full Time	Part Time	On Call	Temporary
Beginning Salary:	_____			
Ending Salary:	_____			
May we call this employer?	_____			

Employment Dates:				
From:	_____	To:	_____	( ) _____
	Mo. Year		Mo. Year	Employer (Company Name) Telephone Number
Full Name of Supervisor		Employer's Street Address		
Title of Position Held	City	State	Zip Code	
Summarize Job Duties:				
_____				
_____				
Circle One:	Full Time	Part Time	On Call	Temporary
Beginning Salary:	_____			
Ending Salary:	_____			
May we call this employer ?	_____			

Employment Dates:				
From	_____	To:	_____	( ) _____
	Mo. Year		Mo. Year	Employer (Company Name) Telephone Number
Full Name of Supervisor		Employer's Street Address		
Title of Position Held	City	State	Zip Code	
Summarize Job Duties:				
_____				
_____				
Circle One:	Full Time	Part Time	On Call	Temporary
Beginning Salary:	_____			
Ending Salary:	_____			
May we call this Employer?	_____			

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

I understand that the company may investigate my driving record and my criminal record and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends, personal references and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written inquiry within a reasonable period of time to receive additional detailed information about the nature and scope of the investigation. The Company reserves the right to obtain this report to evaluate your application for employment.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. It is further understood that this At will employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer of this company.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

Westminster Village, Inc. maintains a policy and procedure for a Drug-Free Workplace. I understand that as a condition to my employment, I will submit and test negative on a drug-screening test administered at the time of the pre-employment physical and that I will comply with the policies and procedures as they may be amended for the duration of my employment.

I represent and warrant that I have read and fully understand the foregoing requirements and seek employment under these conditions.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Rev.3/98: 11/02

FOR HUMAN RESOURCES USE ONLY

Interviewed By: _____	Date: _____
Results: _____	
Test Materials Date: _____	Rate Quoted: _____ Hr/Annual
Board of Nursing Phone Verification: _____	Expiration Date _____
	License/Certification Number _____