



APPLICATION FOR EMPLOYMENT

It is our policy to provide equal employment opportunities to all qualified persons without regard to race, color, religion, sex, national origin, age, disability, marital status, because of past, current or future military obligations or status in any other group protected by federal, state or local law.

Personal Information

Name _____ Previous Name(s) _____
Last First Middle

Address _____
Street City State ZIP

Phone Number () _____ Alternate or Work Phone () _____

Are you 18 years or older? Yes No

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? Yes No

Have you ever been convicted of any crime, including misdemeanors and felonies? Yes No If yes, please state the nature of the offense(s) and the date of the conviction(s).

NOTE: Answering "yes" to the above question does not constitute an automatic bar from employment. Consideration will be given to the nature of the crime, its seriousness, age at time of offense, the date of the offense, and the position for which you are applying.

Employment Desired

Position _____ Date you can start _____ Salary desired _____

Are you available to work _____ Full-Time _____ Part-Time _____ Temporary What days? S M T W T F S

Can you perform the essential functions of the job(s) for which you are applying, as you understand them, with or without reasonable accommodation? Yes No



Have you ever been employed by Prestige Care Center of Nebraska City before? Yes No

If yes, when: _____

Have you filed an application with Prestige Care Center of Nebraska City before? Yes No

When? _____

Are you employed now? Yes No

If so, may we contact your present employer? Yes No

Employment History

Please describe your employment history starting with your current or last job. Include military assignments if applicable and list any periods of unemployment or self-employment. Use the back of this sheet if necessary.

From ___ / ___ / ___ To ___ / ___ / ___ Employer _____ Supervisor _____
Employer Address _____ Telephone Number (___) _____
Position _____ Wage/Salary _____
Reason for Leaving _____

From ___ / ___ / ___ To ___ / ___ / ___ Employer _____ Supervisor _____
Employer Address _____ Telephone Number (___) _____
Position _____ Wage/Salary _____
Reason for Leaving _____

From ___ / ___ / ___ To ___ / ___ / ___ Employer _____ Supervisor _____
Employer Address _____ Telephone Number (___) _____
Position _____ Wage/Salary _____
Reason for Leaving _____



Education

	Name & Location	Number of years completed	Did you graduate?	Subject(s) studied & Degree(s) received
High School			Yes <input type="checkbox"/> No <input type="checkbox"/>	
College			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other			Yes <input type="checkbox"/> No <input type="checkbox"/>	

References (Please give the names of three persons not related to you, whom you have known at least one year.)

Name	Address	Telephone	Relationship to You

Referral Source Advertisement Friend Relative Walk-In Employment Agency Other

Miscellaneous

Please list any additional information you would like us to consider (i.e. specialized skills, certifications, etc.):

Have you ever been discharged from a job? Yes No

If yes, please explain why: _____



May we telephone you to follow up on this application at home? Yes No

If yes, what is the best time to call? _____

May we telephone you to follow up on this application at work? Yes No

If yes, what is the best time to call? _____

Business Phone: () _____

Authorizations

Background Check, Drug and Alcohol Testing: I understand that Prestige Care Center of Nebraska City may require me to undergo a background check and/or pre-employment drug and alcohol testing after receiving a conditional offer of employment. Applicants will receive additional information about the foregoing and may be required to sign additional authorizations regarding the same. I understand and acknowledge that any offer of employment will be conditioned upon my successful completion of any background check or drug and/or alcohol test that is conducted.

EMPLOYMENT AT WILL

I understand that nothing contained in this employment application or in the granting of an interview is intended to create a contract between Prestige Care Center of Nebraska City and myself for either employment or the provision of any benefits. I further understand that if an employment relationship is subsequently established, I will have the right to terminate my employment at any time and Prestige Care Center of Nebraska City will have a similar right.

Acknowledgment

I hereby certify that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize the references listed above or in a related employment resume to provide Prestige Care Center of Nebraska City with any and all information concerning my previous employment. Further, I release all parties and persons from any and all liability and from any damages that may result from furnishing this information to Prestige Care Center of Nebraska City as well as from the use or disclosure of this information by Prestige Care Center of Nebraska City or any of its agents, employees or representatives. I understand that any representation, falsification or material omission of information on this application, in a related employment resume or in a personal interview may result in my failure to receive an offer or, if I am hired, in the termination of my employment.



Applicant Signature

Date