

**Wesbury Hillside Home
535 Williamson Road
Meadville, PA 16335**

APPLICATION FOR EMPLOYMENT

All applicants will be considered for employment regardless of race, color, religious creed, sex, age, ancestry, national origin, marital status, disability, LEP, or any other status protected by law.
Employees are hired on the basis of their qualifications to fulfill the tasks for which they apply.
This facility will coordinate efforts to comply with all agencies enforced by EEOC.

PLEASE PRINT ALL INFORMATION

DATE: _____

NAME: _____ PHONE NUMBER: _____

ADDRESS: _____ CELL PHONE NUMBER: _____

CITY _____ STATE _____ ZIP _____

Are you a U.S. Citizen? Yes No

Are you below the age of 18? Yes No

If yes, do you have work papers? Yes No

Are you legally authorized to work in the United States? Yes No *Proof of citizenship or immigration status will be required upon employment.

Have you ever been convicted or adjudicated of a crime? Yes No *Criminal Background check required upon employment.

Have you ever been accused or convicted of abuse or neglect of a senior citizen? Yes No

If yes, charge _____ Date: _____

Disposition: _____ Date: _____

Are you currently on probation? Yes No

If yes, name and phone number of individual supervising your case: _____

POSITION(S) APPLYING FOR: RN LPN CNA ACTIVITIES LAUNDRY

KITCHEN MAINTENANCE / SECURITY

HOUSEKEEPING OFFICE / ACCOUNTING

OTHER, PLEASE SPECIFY: _____

Hourly wage expected? \$ _____ What shifts are you willing to work? 1st 2nd 3rd

Are you able to work weekends and holidays if needed? Yes No If No, Explain: _____

I am willing to work full time Yes No I am willing to work part time Yes No

When will you be available for work? _____

Were you previously employed by Wesbury Hillside Home? Yes No If yes, when, in what department and if under another name: _____

RECORD OF EDUCATION

Education	Name and Address of School	Course of Study	Circle last year Completed	Year Graduated
High School		<input type="checkbox"/> Academic <input type="checkbox"/> General	9 10 11 12	
Vocational Technical School		Course of Study	1yr. 2 yr. 3 yr.	
College		Major _____	Fr So Jr Sr	Year Graduated _____ Degree Earned _____
GED or Other (Specify)				Year Earned

Professional registration and / or licensure for LPN, RN, CNA or other:

Type: _____ State: _____ Registration number: _____

Dates: _____

Please include any additional courses, workshops, seminars or other training and skills (including technical, trade and military) _____

Professional or Personal References (Not Related to You)

1. Name: _____ Phone Number: _____ Relationship: _____

2. Name: _____ Phone Number: _____ Relationship: _____

3. Name: _____ Phone Number: _____ Relationship: _____

Reference Verification

Reference # 1 Contact Date: _____ By Whom: _____ Notes _____

Reference # 2 Contact Date: _____ By Whom: _____ Notes _____

Reference # 3 Contact Date: _____ By Whom: _____ Notes _____

EMPLOYMENT HISTORY

Start with current or most recent employment:

Name of Employer : _____ Phone Number: _____

Address: _____ City, State, Zip _____

Employment Dates From: _____ to _____ Position Held: _____

Duties Performed: _____

Salary: \$ _____ Supervisors Name: _____ May we contact this employer? Yes No

Reason for Leaving? _____

Name of Employer : _____ Phone Number: _____

Address: _____ City, State, Zip _____

Employment Dates From: _____ to _____ Position Held: _____

Duties Performed: _____

Salary: \$ _____ Supervisors Name: _____ May we contact this employer? Yes No

Reason for Leaving? _____

Name of Employer : _____ Phone Number: _____

Address: _____ City, State, Zip _____

Employment Dates From: _____ to _____ Position Held: _____

Duties Performed: _____

Salary: \$ _____ Supervisors Name: _____ May we contact this employer? Yes No

Reason for Leaving? _____

PLEASE READ AND SIGN THE FOLLOWING
APPLICANT PLEASE READ CAREFULLY BEFORE SIGNING.

My signature below indicates that I have read, I understand, and I agree to the following:

1. I hereby certify that the information I have provided in the employment application is true and complete to the best of my knowledge. I understand that if I am hired, the discovery of any false information provided or any relevant information omitted (no matter when discovered) shall result in the termination of my employment.
2. I authorize and instruct Wesbury Hillside Home to make whatever inquiries it deems necessary of any person or organization who is not a consumer reporting agency to verify any of the information I have provided in this application and to determine my qualifications and abilities.
3. In exchange for Wesbury Hillside Home's agreement to receive, process and consider my application for employment, I hereby release Wesbury Hillside Home and any and all persons or organizations contacted by Wesbury Hillside Home from any and all claims or causes of action arising out of Wesbury Hillside Home's verification of the information I have provided in this application and/or its determination of my qualifications and abilities.
4. I understand that if an offer of employment is made to me it shall be contingent upon my completion of a pre-employment physical assessment to the satisfaction of Wesbury Hillside Home. I hereby consent to undergo physical examination which may include any and all tests and procedures determined by Wesbury Hillside Home to be helpful in evaluating my suitability for employment, including but not limited to blood tests, urinalysis, X-rays, controlled substance and/or alcohol testing, etc.
5. I understand that Wesbury Hillside Home is required to obtain a criminal background check from appropriate authorities. Conviction of one or more crimes listed on the Older Adult Protective Services Act will result in denial or immediate termination of employment
6. I understand that this application does not constitute an employment contract of any kind. I understand that if hired, my employment with this facility shall be probationary for a period of 90 days, and that at any time during my probation or thereafter, my employment relation with this facility is as an employee at will, and that my employment may be terminated at any time, for any reason, by this employer.

DATE: _____ SIGNATURE OF APPLICANT: _____

Revised 2/2009