

Employment Application



APPLICANT INFORMATION

Last Name _____ First _____ M.I. _____ Date _____

Street Address _____ Apartment/Unit # _____

City _____ State _____ ZIP _____

Phone _____ E-mail Address _____

Date Available _____ Social Security No. _____ Desired Salary _____

Position Applied for _____

Are you legally authorized to work in the U.S.? If offered employment, documentation to verify eligibility will be required. YES NO

Have you ever been employed by *The Crossings at Independence*? YES NO If yes, please indicate location and dates: _____

Current Employee Referred By _____

AVAILABILITY/SHIFT PREFERENCE

Employment Desired: FT PT PRN

Hours Available Per Week: _____ Hours Available Per Weekend: _____

Please indicate shifts that you can work: Days Evenings Nights Weekends

Days/Hours Available to Work: No Preference Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Have you ever been convicted of a crime to include misdemeanors or felonies? YES NO If yes, explain: _____

If you are applying for a position which requires driving, do you have a valid Driver's License? YES NO Driver's License #: _____

EDUCATION

High School _____ Address _____

From _____ To _____ Did you graduate? YES NO Diploma _____

College _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

Other _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

Please list technical skills, clerical skills, trade skills, etc., relevant to the position for which you are applying. Include relevant computer systems and software packages that you have working knowledge, and note your level of proficiency (basic, intermediate, or expert).

REFERENCES

Please list three professional references.

Full Name Relationship

Address Phone

Email Address:

Full Name Relationship

Address Phone

Email Address:

Full Name Relationship

Address Phone

Email Address:

PREVIOUS EMPLOYMENT

Please list your previous employment, beginning with your current or most recent position. Each section must be completed fully. Incomplete applications will not be considered.

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your supervisor?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

ADDITIONAL INFORMATION

Use the space below if you wish to provide any supplementary information which may be helpful in accurately determining your qualifications for the position for which you are applying.

DISCLAIMER AND SIGNATURE

The Crossings at Independence is an equal employment opportunity employer which selects the individual who is the best match for a position based on job-related qualifications, without regard to race, color, creed, sex, national origin, religion, sexual preference, age, disability, or other protected group status.

I affirm that the information I have provided in this application is true to the best of my knowledge, information and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is grounds for rejection of my application, and that providing false or misleading information in this application is grounds for discharge.

I authorize the company to verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers and all other persons and entities, from any and all claims, demands or liabilities arising out of or in any way related to such inquiry or disclosure. I also understand that all employment is contingent on reference checks, a criminal background check and drug screening.

Signature

Date