



Application for Employment

Please Print

Received on:

By (Initial):

Prof. Lic./Cert #
(indicate state it is current)

Application active for 60 days.

Name _____
(Last) (First) (Middle)

Address _____

City _____ State _____ Zip _____

Telephone () _____ Date of application _____

Position Applying for _____

Application Information

Are you at least 18 years of age? Yes No

Are you at least 16 years of age? Yes No

(If less than age 16, can you furnish a work permit? Yes No

Are you employed now? Yes No May we contact your present employer? Yes No

Can you, if hired, submit verification of your legal right to work in the U.S.? Yes No

If hired, you will be required to submit documents sufficient to establish employment authorization and identity compliance with the Immigration Reform and Control Act of 1986. While you need not provide this proof of citizenship or immigration status at the time you are interviewed, please be prepared to assure us that you can do so immediately upon being hired.

On what date would you be available for work? _____ Expected Salary _____

Are you available to work:

Full Time Part-Time PRN Temporary What days? S M T W T F S

What hours? Day Evening Night

Are you on a lay-off and subject to recall? Yes No

Give name, address and telephone number of three references.

Name

Address

Telephone

Do you have a record of founded child or dependent adult abuse or have you ever been convicted of a crime other than a simple misdemeanor offense relating to motor vehicles and laws of the road under Iowa Code chapter 321 or equivalent provisions, in this state or any other state? Yes No

If so, what was the date and nature of the criminal offense?

Have you ever had a finding by a court, by a disciplinary board or professional licensing or certification agency of abuse, neglect, mistreatment of residents, or misappropriation of their property? Yes No

Have you ever been the subject of an investigation into abuse or neglect of a child or an adult? Yes No

If so, what was the outcome of the investigation?

State any additional information you feel may be helpful to us in considering your application.

Employment Experience

Start with your present or last job. Include military service assignments and/or volunteer activities. Account for all periods of unemployment. Exclude organization names which indicate, for example, race, color, religion, sex, national origin or disability. If you need additional space, please continue on a separate sheet of paper.

Employer:	Job Title:
Address:	Supervisor:
City/State/Zip:	Work Performed:
Telephone:	
Dates Employed: From: To:	Hourly Rate/Salary: Starting: Ending:
Reason for Leaving:	

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Education

School Name	Elementary	High School	College University	Graduate/Professional
Years Completed: (circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study:				

Please list education or specialized experience that relates to the position(s) for which you are applying. Exclude names or terms that indicate, for example, race, color, religion, sex, disability, age or national origin.

Educational Honors; Extra Curricular Activities; Professional Societies or other information (if unrelated to ethnic or religious groups or organizations):

Special skills and qualifications, including those acquired from employment or other experience

APPLICANT'S STATEMENT

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the answers given in this Application for Employment are true and complete to the best of my knowledge. The facility may investigate all statements made in this Application and I understand that any false or misleading information provided may result in my immediate discharge, if I am hired, regardless of when discovered. In signing this Application I state that I have reviewed a copy of the Job Description for all jobs for which I have applied. I understand that I will be required to fulfill the essential functions of the job for which I am hired, with or without reasonable accommodation. I also understand that I will be required to pass the company's physical assessment and drug test after I have been given a conditional offer of employment. I understand that this Application is not a contract of employment; that if hired, regardless of any oral representations to the contrary, the employment relationship between myself and the facility is terminable at will; that I have the right to terminate my employment at any time for any reasons, and the facility retains the same right. Any changes to this employment relationship must be in writing. I understand that if hired I am required to abide by all rules and regulations of the facility.

Signature of Applicant

Date

An Equal Opportunity Employer

Applicants are considered for employment, and employees are treated during employment without regard to age, race, color, pregnancy, marital status, sex, national origin, religion, disability or status as a disabled veteran or any other prohibited basis of discrimination under applicable local, state or federal law.