

# CONNECTIONSPUS HEALTHCARE + HOSPICE

## APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

<b>PERSONAL INFO</b>			
NAME:			DATE:
ADDRESS:			
PHONE:		ARE YOU 18 YEARS OR OLDER? ( ) NO ( ) YES	
<b>EMPLOYMENT POSITION DESIRED:</b>			
DATE YOU CAN START:			
ARE YOU PRESENTLY EMPLOYED? ( ) NO ( ) YES			
IF YES, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? ( )NO ( ) YES			
HAVE YOU EVER APPLIED TO THIS AGENCY BEFORE? WHEN? FOR?			
<b>EDUCATION</b>	SCHOOL NAME & LOCATION	# OF YRS ATTENDED	DID YOU GRADUATE?
High School			
Post-secondary education			
Post-secondary education			
Other schooling			
U.S. Military Service:		Rank:	
Are you currently enrolled in the National Guard or Reserve? ( ) no ( ) yes			
Professional License Number (if applicable):		Expiration Date:	
The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.			
<b>GENERAL</b>			
SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:			
<b>PHYSICAL RECORD:</b>			
Do you have any physical limitations that preclude you from performing any work for which you are being considered? ( )no ( )yes			
If yes, what can be done to accommodate your limitation?			
<b>IN CASE OF AN EMERGENCY NOTIFY:</b>			
Name:			
Relation:			
Phone:			

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<b>REFERENCES:</b> Give the names of three persons not related to you, whom you have known at least one year.			
<b>NAME</b>	<b>PHONE</b>	<b>YRS KNOWN</b>	
<b>FORMER EMPLOYERS</b> (List below last four employers, starting with the most recent)			
<b>Dates of Service</b> <small>(mo/yr to mo/yr)</small>	<b>Name and Address of employer</b>	<b>Reason for Leaving</b>	<b>Salary</b>
<b>SWORN STATEMENT:</b>			
1. Do you possess a valid driver's license? <span style="float: right;">( ) no ( ) yes</span>			
2. Have had your driver's license suspended or revoked in the past 7 years? <span style="float: right;">( ) no ( ) yes</span>			
3. Have you ever been convicted of a criminal offense? <span style="float: right;">( ) no ( ) yes</span>			
4. Do you have any criminal convictions or any pending criminal charges within or without the Commonwealth? <span style="float: right;">( ) no ( ) yes</span>			
5. Have you ever been convicted specifically of abuse, neglect or moral turpitude? <span style="float: right;">( ) no ( ) yes</span>			
If you answered yes to questions four (4) or five (5) above, name the offense:			
<p><b>I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application, or at any time during employment, shall be grounds for dismissal.</b></p> <p><b>I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.</b></p> <p><b>I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.</b></p>			
<b>Applicant Signature:</b>		<b>Date:</b>	
See attached documents for interview history, results and contract if applicable. Below to be completed by RAH.			
Reviewed by: _____		Date: _____	
<b>Personnel Committee Chair</b>			
Accredited School? Yes _____ No _____			