



## Employment Application

An Equal Opportunity/Affirmative Action Employer

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, non-job related disability, or any other protected group status.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number : \_\_\_\_\_ ( home) \_\_\_\_\_ (cell)

Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Circle if you are any of the following: CNA/RNA    TMA    LPN    RN    License # \_\_\_\_\_

Are you under 16 years of age? YES \_\_\_ NO \_\_\_

Are you able to work all shifts? YES \_\_\_ NO \_\_\_    Full time \_\_\_\_\_ Part Time \_\_\_\_\_ (Please explain)

\_\_\_\_\_

### Education

Name & Location of Schools	Last Grade Completed	Period of Attendance	
		From	To

### Former Employers (List most recent first)

Name, & Address	Duties:	From	To	Reason for Leaving
Phone Number: Supervisor:				
Name & Address	Duties:			
Phone Number: Supervisor:				
Name & Address	Duties:			
Phone Number: Supervisor:				

Personal References (Not Relatives)

Name	Address	Business	Phone

In case of emergency notify: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address \_\_\_\_\_

Have you worked for us before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

If hired, on what day will you be available to start work? \_\_\_\_\_

List any friends or relatives working for us: \_\_\_\_\_

Occasionally, the form of an application blank makes it difficult for an individual to adequately summarize his/her complete background. To assist us, summarize any individual information necessary to describe your full qualifications. (Excluding information that will review race, color, creed, etc. and any other Minnesota protected status).

\_\_\_\_\_

\_\_\_\_\_

**Please read carefully**

**Applicant's Certification, Agreement, and Informed Consent**

I hereby certify that the facts set forth in the above employment applications are true and complete to the best of my knowledge. I understand if employed, falsified statements on this application shall be considered sufficient cause for dismissal. Oak Hills Living Center is hereby authorized, for the purpose of employment, to make any investigation of my personal history, past and present employers, including criminal background check (both public and private). This is effective for one year after the date below.

Offers of employment are contingent upon the following:

- \*Adequacy of reference checks.
- \*Verification of eligibility to work through I-9 verification.
- \*Adequacy of criminal background checks.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_