

Extended Care Employment Application

We are an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name

Address		City	State	Zip
Phone Number	Mobile Number	Email Address (mandatory)		
Are You A U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are you at least 18 years old? (If under 18, subject to verification that you are of minimum legal age) Yes <input type="checkbox"/> No <input type="checkbox"/>		

If hired, would you have a reliable means of transportation to and from work?

Yes No

Position

Position You Are Applying For/Shift Desired	Available Start Date	Desired Pay Range
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Employment Desired

Full Time Part Time Seasonal/Temporary

Are you able to perform essential job functions of the job? If no, explain.

Availability: (work weekends, specific days, etc.)

Availability to work Holidays?

Education

School Name	Location	Years Attended	Degree Received	Major/License Number

References

Name	Title	Company	Phone

Employment History

Employer (1)	Job Title		Dates Employed
Work Phone	Duties		
Address	City	State	Zip
Employer (2)	Job Title		Dates Employed
Work Phone	Duties		
Address	City	State	Zip
Employer (3)	Job Title		Dates Employed
Work Phone	Duties		
Address	City	State	Zip
Employer (4)	Job Title		Dates Employed
Work Phone	Duties		
Address	City	State	Zip
Employer (5)	Job Title		Dates Employed
Work Phone	Duties		
Address	City	State	Zip

Date

Applicant's Signature

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge. I also authorize for this employer to investigate my references, work record and education. I understand that this is not a contract and if hired, know that my employment is not for a definite amount of time and I could be terminated at any time. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Print)

Signature

Date

For Company Use Only:

Documentation of References

Notes:

1.

2.

3.

Verify Email Address:

Rate of Pay:

Full Time or Part Time

Employment Application

This Company conducts internal background checks and may search public records. I am entitled to copies of any such public records obtained by the company unless I mark the check box below.

If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box signed below.

“Public Records” are defined by California state law and means records documenting an “arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgement.” (Civil Code section 1786.53) **Any public records request performed by internal personnel employed by the Company will only be conducted and use to the extent allowed by federal, state or local law, including any laws governing use of criminal history information.**

I waive the receipt of a copy of any public record described in the paragraph above.