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Application for Employment at Chapman Valley Manor

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(Please print clearly)

Date: _____

Personal Information

Name: _____
Last First Middle Initial

Address: _____
Street City State Zip Code

Telephone: _____ Cell Phone: _____
(Area Code) Number (Area Code) Number

Are you at least 18 years old? _____
Yes No

Social Security No. _____ Date of Birth: _____
(Optional)

Certificate No. _____

If not a US citizen do you have the right to remain permanently and work in the USA? ___ YES ___ NO

Alien Reg. No: _____

EMPLOYMENT DESIRED

Position applying for: _____ Desired Rate of pay \$ _____

Shift you can work: _____ Days _____ Evenings _____ Nights

Hours willing to work: _____ Full time _____ Part time _____ PRN _____ Weekends

Date available to start work: _____
Month Day Year

May we contact your present and past employers? _____ Yes _____ No

If no please explain: _____

Did we previously employ you? _____ Yes _____ No

If yes: When _____ Supervisor _____

Reason for leaving? _____

Educational Data

School	Print Name, Number and Street, City, State and Zip Code for each School Listing	No. of Years Completed	Degree, Major, or Type of Course
High School			
College			
Graduate School			
Trade, Bus., Night or Corres.			

Are there any other experiences, skills or qualifications, which you feel would qualify you to work for Chapman Valley Manor? _____

FORMER EMPLOYERS

List below your work experience, starting with your present or last place of employment first.

TIME EMPLOYED	NAME, ADDRESS AND PHONE NUMBER OF EMPLOYER	NAME OF SUPERVISOR AND YOUR JOB TITLE	SALARY
From _____ To _____	_____	_____	Start _____ End _____
From _____ To _____	_____	_____	Start _____ End _____
From _____ To _____	_____	_____	Start _____ End _____

REFERENCES (Not Employers or Relatives)

NAME & ADDRESS	OCCUPATION	PHONE NUMBER AND YEARS AQUAINTED	Employer Only
			Do Not Write in this space Ref Checked Date & Time

Employment understanding (Please read and sign)

This institution does not discriminate in hiring or any decision on the basis of race, color, sex, citizenship, national origin, ancestry, Vietnam era or Veteran status, or on the basis of age, physical or mental disability unrelated to the ability to perform the work required. No question on this application is intended to secure information to be used for such discrimination.

I voluntarily give this institution the right to make a thorough investigation of past employment and activities, agree to cooperate in such investigation and release from all liability or responsibility all persons, companies or corporations supplying such information. I consent to take the physical examination, and future physical examinations as may be required by this institution at such time and place as the institution shall designate. I understand that an offer of employment may be contingent on passing the physical examination which relates to the essential duties I would be required to perform.

I understand that my employment is at will and that either party is free to terminate the employment relationship at any time without cause. I also understand that my employment may be terminated for any misstatement or omission of fact appearing on this application.

Applicant's Signature _____ **Date** _____