

# EMPLOYMENT APPLICATION

Please print clearly.

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources department.



## Personal Information

Name \_\_\_\_\_  
Last First Middle Initial

Other Names Used \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Application \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone: Cell (\_\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_

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

Best time to call you \_\_\_\_\_ Have you submitted an application here before?  Yes  No

## Employment Desired

Position(s) Applying For \_\_\_\_\_

Full-Time  Part-Time  PRN  Temporary  Seasonal Date Available to Start \_\_\_\_\_

If part-time or PRN, number of hours per week available \_\_\_\_\_

Shift:  1<sup>st</sup> Shift  2<sup>nd</sup> Shift  3<sup>rd</sup> Shift Pay Expected \_\_\_\_\_

Have you ever worked for Sunset Home?  Yes  No If yes, when? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Are you 18 years old or older?  Yes  No Will you work overtime if required?  Yes  No

Are you legally eligible for employment in the United States?  Yes  No

Referral Source – How did you hear about this position? \_\_\_\_\_

## Education

High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Business/Technical School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other Education or Training:		

## Professional Licenses and/or Certifications

Type:	Organization or State Issued:	Date Issued:	Number:
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## Skills and Qualifications

Summarize any special training, skills, licenses, and/or certificates that may assist you in performing the position for which you are applying:

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**References** – Please do NOT include relatives.

Name	Address	Phone Number	Relationship to You

**Employment History** – Please list all previous employment, beginning with the most recent. Please give accurate and complete information.

Name of Employer:	Job Title:
Address – Street, City, State:	Dates Employed – Starting & Ending:
Summarize Type of Work Performed:	
Telephone:	Rate of Pay – Starting & Ending:
Name & Title of Supervisor:	Reason for Leaving:
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, reason:	

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Name & Title of Supervisor:	Reason for Leaving:
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, reason:	

Please attach another sheet if you need more room for your employment history.

## **Applicant Statement**

I certify that all information I have provided on this Application is true and complete to the best of my knowledge. I understand that false statements, misrepresentations, or omission of information will be sufficient cause for cancellation of consideration for employment or dismissal from Sunset Home if I have already been employed.

I authorize present and former employers, education institutions, and individuals I have listed to furnish information about my employment record, including a statement of the reason for termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information.

I understand that this employer does not unlawfully discriminate based on race, creed, color, sex, religion, genetic information, citizenship, national origin, age, handicap, veteran status or any condition prescribed by local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, I understand I may submit another application.

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

*Please do not sign until you have read the above applicant statement.*

I certify I fully understand and accept all terms and conditions for the above statement.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_