

APPLICATION FOR EMPLOYMENT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department. Social Security #_____ Name: First Last Middle Address: Street City State Zip Code Home Phone: () Cell/Other Phone: () E-Mail Address: Position(s) Applying For: Date of Application: Referral Source: (Please check the appropriate category and name the source of who referred you for application/employment) □ Walk-In School 🗌 Job Fair Employee Advertisement Staffing Agency Company's Website Government Employment Agency Employment Classified Ad CareerBuilder Other Internet Source Other If necessary, the best time to call you at home is _____ AM PM May we contact you at current employer? Yes No _____ Time _____ AM __ PM If yes, work number and best time to call? Work Phone: (____) If you are under 18, and it is required, can you provide a work permit? Yes 🗌 No If no, please explain Have you submitted an application here before? T Yes 🗌 No If yes, give date(s) and position(s) _____ Have you ever been employed here before? T Yes 🗌 No If yes, give date(s) and position(s) Are you legally eligible for employment in this country? Yes No Date available for work _ What is your desired salary range or hourly rate of pay? <u>\$</u> Type of employment desired Full-Time w/ Benefits (40 hrs/wk) Part-Time w/ Benefits (30-39 hrs/wk) Part-Time w/o Benefits (1-29 hrs/wk) PRN (work as needed) Temporary Other Will you relocate if job requires it?
Yes 🗌 No Will you travel if job requires it?
Yes No Will you work overtime, if required? Yes No If no, please explain If they have been explained to you, are you able to meet the attendance requirements of the position? \square N/A \square Yes \square No If they have been explained to you, are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodations)? N/A ☐ Yes ☐ No Driver's license number required if driving may be required in the job for which you are applying: License # ______State_____ Have you ever been bonded? \square N/A Yes No Have you ever plead "guilty" or "no contest" to, or been convicted of a crime?
Yes No If yes, give date(s) and details Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your

If yes, please explain _

EMPLOYMENT HISTORY: Starting with your most recent employer, provide the following information in as much detail as possible.

Employer:	Phone #: ()	Dates Employed:	Month/Year From:	Month/Year To:
Street Address	City/State			
Starting Job Title	Final Job Title	Starting Compensation Hourly Salary	\$	Per
Immediate Supervisor Name & Title	May We Contact for Reference?	Ending Compensation Hourly Salary	\$	Per
Why did you leave:		Other Compensation	\$	
Summarize the type of work performed & job	responsibilities			
Employer:	Phone #: ()	Dates Employed:	Month/Year From:	Month/Year To:
Street Address	City/State			
Starting Job Title	Final Job Title	Starting Compensation Hourly Salary	\$	Per
Immediate Supervisor Name & Title	May We Contact for Reference?	Ending Compensation Hourly Salary	\$	Per
Why did you leave:		Other Compensation	\$	
Summarize the type of work performed & job	responsibilities			
Employer:	Phone #: ()	Dates Employed:	Month/Year From:	Month/Year To:
Street Address	City/State			
Starting Job Title	Final Job Title	Starting Compensation Hourly Salary	\$	Per
Immediate Supervisor Name & Title	May We Contact for Reference?	Ending Compensation Hourly Salary	\$	Per
Why did you leave:		Other Compensation	\$	
Summarize the type of work performed & job	responsibilities			

EMPLOYMENT HISTORY: (continued)

Please explain any gaps in your employment, other than those due to personal illness, injury or disability.		
If not addressed on previous page, have you ever been fired or asked to resign from a job:	Yes No	
If yes, please explain		
SKILLS AND QUALIFICATIONS:		
Summarize any special training, skills, licenses and/or certifications that may assist you in performance of the second s	forming the position for which you are	
applying		

Computer Skills (check appropriate boxes, including software titles and years of experience):

Microsoft Word	Years	Internet	Years
Microsoft Excel	Years	Intranet	Years
Microsoft Outlook	Years	Microsoft PowerPoint	Years
Electronic Medical Record	Years	Scanning	Years
Other	Years	Other	Years
Words Per Minute	Years		

EDUCATIONAL BACKGROUND: Starting with your most recent school attended, provide the following information.

Name of School, City, State	Dates Attended	Completed	GPA	Major/Minor
		Diploma GED Degree Certification Other		
		Diploma GED Degree Certification Other		
		Diploma GED Degree Certification Other		
		Diploma GED Degree Certification Other		

REFERENCES: List names and telephone numbers of three business/work references who are *not related* to you and who are not previous supervisors. If not applicable, list three school or personal references who are *not related* to you.

Name of Reference	Title	Relationship to You	Phone Number	Number Years Known
			()	
			()	
			()	

RELATED INFORMATION: To what job-related organizations (professional, trade, etc) do you belong? Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status.

Is there any other job-related information you want us to know about you?

APPLICANT STATEMENT – PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE YOU SIGN & RETURN THE APPLICATION:

I certify that all information I have provided in order to apply for and secure work with Cumberland Heights is true, complete and correct.

I expressly authorize without reservation the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that Cumberland Heights does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal laws.

I understand that this application remains current of only 30 days. At the conclusion of that time, if I have not heard from Cumberland Heights and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I understand that Cumberland Heights will require a drug screening test as a part of the selection and hiring process, and that such screening will consist of a urine drug and alcohol screen or other medically recognized test(s) designed to detect traceable amounts of a controlled substance in my body. If detectable amounts are found, a second approved test will be performed on the same specimen. If the results of the second test are also positive, I will be disqualified from any further consideration for a period of one (1) year. I hereby give my consent to Cumberland Heights to administer these screening procedures. If employed, I agree to submit to further drug screening, if requested of me at any time during my employment.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and Cumberland Heights reserves the right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of Cumberland Heights is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they re in writing and signed by the employer's executive officer.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form to this regard.

Cumberland Heights does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purposes of limiting or excluding an applicant from consideration for employment on the basis of his or her gender, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state and local law. Cumberland Heights likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state and local law. Cumberland Heights likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, co-worker, subordinate, or non-employee (such as a vendor or customer). Cumberland Heights takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employee or may result in my immediate discharge from Cumberland Heights' service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Signature of Applicant

Date