



NURSING & REHABILITATION CENTER

1551 East End Blvd Wilkes Barre PA 18711 Fax: 570/823-9165 Attn: Human Resources

Employment Application

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, use of lawful products during non-work hours and any other legally protected status.

PLEASE PRINT CLEARLY

Position(s) Applied For:	Date of Application:
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How did you learn about the company? (circle one)					
Advertisement	Friend	Walk-in	Recruiting Firm	Current Employee	Other:

Last Name		First Name		Middle Name	
Address	Street	City	State	Zip Code	
Telephone number(s) where we can contact you: Home: ()			Social Security Number Work: ()		

(Please circle)

Are you available to work: Regular, Full-time Regular Part-time, Hours: Temporary, Hours:

Are you available to work (circle): 1st Shift 2nd Shift 3rd Shift

On what date would you be available for work?

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever submitted an application with the company before? Yes No

If yes, please give date:

Have you ever been employed with the company before? Yes No

If yes, please give date:

Are you currently employed? Yes No

May we contact your present employer for references? Yes No

Are you legally qualified to work in the United States? Yes No
(Proof of citizenship or immigration status will be required upon employment.)

Have you ever been convicted of a crime other than a summary offense? Yes No

If yes, please explain:

EDUCATION

	Elementary School	High School	Technical School	College	Other
School Name and Location					
Years Completed	4 5 6 7 8	9 10 11 12	1 2	1 2 3 4	1 2 3 4
Diploma Degree		Yes No	Yes No	Yes No	
Major Course(s) of Study					
Summarize special skills and training not listed above:					
Describe honors received:					

List professional, trade, business, or civil activities and offices held. You may exclude memberships which may reveal sex, race, religion, national origin, age, or disability or other protected status.

REFERENCES

Give name, address, and telephone number of three business references who are not related to you.

1.

2.

3.

EMPLOYMENT EXPERIENCE - Start with your present or most recent position.

1. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)	Base Pay		
Job Title	Start	Final	
Supervisor			
Reason for Leaving			
2. Employer	Dates Employed		
Address	From	To	
Telephone Number(s)	Base Pay		
Job Title	Start	Final	
Supervisor			
Reason for Leaving			
3. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)	Base Pay		
Job Title	Start	Final	
Supervisor			
Reason for Leaving			

4. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)	Base Pay		
Job Title	Start	Final	
Supervisor			
Reason for Leaving			

If you need additional space, please continue on the back of this employment application.

SPECIAL SKILLS & QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience.

Have you ever had any job-related training in the United States military? Yes No

If yes, please give date: _____

Are you able to perform the essential requirements of the job? Yes No

If no, are there reasonable accommodations that can be made to allow you to perform the essential functions of the job?

State any additional information you feel may be helpful to us in considering your application.

<p>I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.</p> <p>I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.</p> <p>In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.</p>
<p>_____ Signature of Applicant</p> <p>_____ Date</p>

APPLICANT INFORMATION

PERSONAL INFORMATION

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____

GENDER (circle one) MALE FEMALE

Valley Crest, in compliance with governmental recordkeeping and reporting requirements, collects and maintains information on the sex, race, and ethnic background of all employees. This information is also used to evaluate the effectiveness of our equal opportunity program. You are invited to volunteer this information by selecting one of the categories below. Failure to provide this information will not jeopardize or adversely affect your employment. This information will be treated as confidential and will only be used in accordance with the law. Furthermore, the data that is reported to the government will not identify any particular individual.

PLEASE SELECT ONE OF THE CHOICES BELOW:

_____ "Hispanic or Latino"

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

_____ "White" (Not Hispanic or Latino)

A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

_____ "Black or African American" (Not Hispanic or Latino)

A person having origins in any of the black racial groups of Africa.

_____ "Native Hawaiian or Other Pacific Islander" (Not Hispanic or Latino)

A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

_____ "Asian" (Not Hispanic or Latino)

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

_____ "American Indian or Alaska Native" (Not Hispanic or Latino)

A person having origins in any of the original peoples of North and South America (including Central America), and who maintain a tribal affiliation or community attachment.

_____ "Two or More Races" (Not Hispanic or Latino)

All persons who identify with more than one of the above five races.

Special Employment Notice to Disabled Veterans, Vietnam Era Veterans and Individuals with Physical and/or Mental Disabilities: If you are a disabled Veteran, or have a physical or mental disability, you are invited to volunteer this information. If you wish to be identified, please indicate so below:

_____ Disabled Individual _____ Disabled Veteran _____ Vietnam Era Veteran