

Application for Employment
WOODCREST VILLAGE LLC
(Pre-employment Questionnaire) (As an Equal Opportunity Employer)

PERSONAL INFORMATION

Name	SSN	/	/	Date
<i>Last</i>	<i>First</i>	<i>M.I.</i>		
Present Address				
<i>Street or PO Box</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	
Street Address				
<i>Street or PO Box</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	
Phone No.	Are you 18 Years or Older?		() Yes	() No

Email Address:

EMPLOYMENT DESIRED

Position _____ Potential Start Date: _____ Salary Desired: _____

() FULL TIME () PART TIME () PER DIEM

() DAYS () EVENINGS () OVERNIGHTS () WEEKENDS

Are you currently employed? _____ If so may we inquire of your current employer? _____

Have you ever applied to or worked for a Terrace community before? _____ If yes, where? _____

GENERAL

Areas of special study, unique skills, or interests _____

Have you worked with the elderly before and in what capacity? _____

Do you currently hold a valid healthcare license (RN/LPN/LNA/CNA)? _____

My signature certifies that I have never been convicted of a sexual assault, other violent crime, assault, fraud, abuse, neglect or exploitation nor pose a threat to the health, safety or well-being of a resident. I have not had a finding by the New Hampshire Department of Health and Human Services or any administrative agency in this or any other state for assault, fraud, abuse, neglect or exploitation of any person. I do not have a felony conviction in New Hampshire or any other state.

Employee Signature: _____

How did you learn about us? () Advertisement () Friend () Walk-In () Relative
() Employee () Resident () Other _____

Are you qualified to perform all of the functions for which you are applying (see job description)? If not, please explain:

EDUCATION	Name & Location of School	# of Years Attended	Did You Graduate?	Course of Study
High School				
College				
Trade, Business, Other Education				

FORMER EMPLOYERS (List below your last four employers, starting with the last one first.)

Month & Year	Employer's Name & Address	Phone Number	Supervisor's Name	Salary	Position	Reason for Leaving

REFERENCES (List three persons, not related to you, whom you have known for at least one year.)

Name	Address	Phone Number	Relation	Business	Years Acquainted

In case of emergency notify: _____
Name Address Phone # Relation

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application are grounds for dismissal."

I authorize investigation of all statements contained herein and authorize the references listed above to give you any information concerning my previous employment and any pertinent information, personal or otherwise. I release all parties from all liability from any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice."

Signature

Date

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

Comments: _____

Hired: () Yes () No Position: _____ FT – PT – PD Dept. _____

Salary/Pay Rate: _____ 1st Day of Orientation: _____

Reference Check:

Name: _____

Telephone: _____

Date: _____

Comments: _____

Initials: _____

Name: _____

Telephone: _____

Date: _____

Comments:

Initials: _____