

# **EMPLOYMENT APPLICATION**

NAME (First, Middle, Last)	Home phone:			
Address	Cell phone:			
City, State, Zip Code	Email address:			
How long have you been at this address:	Are you legally authorized to work in the U.S.? YES □ NO□			
Today's Date:				
Position applied for:				
Date available: Desi	ired salary:			
Please state what hours and shift you are available for work:				
Are you 18 years of age or older? YES $\Box$ NO $\Box$				
Have you lived in Pennsylvania continuously for the last the addresses of your previous residences outside of Pe	t two (2) years? YES $\square$ NO $\square$ If NO, please list ennsylvania in the last two years:			
Have you been convicted of any criminal offense other YES, please explain:	than a minor traffic violation?   YES   NO If			
	se your employer believed that you engaged in an act of use explain in detail the circumstances which led up to your			



EDUCATION  Name & location of	Years	Did you		Area of study and degrees acquired
school	attended	graduate?		,
High school:		□YES	;	
		□ №		
College:		□YES	<u> </u>	
		□NO		
Other:		☐ YES	<u> </u>	
		□ №		
PROFESSIONAL LICE	NSES AND CER	TIFICATIONS	Date Is	ssued:
	NSES AND CER	TIFICATIONS		
	NSES AND CER	TIFICATIONS	Date Is	ssued:
Type: Type: Type:  Type:  EMPLOYMENT RECO		TIFICATIONS eet if more sp	Date Is Date Is	ssued: ssued: ssued:
Type: Type: Type:  EMPLOYMENT RECO Current/Last Employer		eet if more sp	Date Is Date Is	ssued: ssued: ssued: s needed) this employer? YES □ NO □
Type: Type: Type:  EMPLOYMENT RECO Current/Last Employer Company name:		eet if more sp	Date Is  Date Is  Date Is  Dace i  ontact  Positio	ssued: ssued: ssued: ssued: s needed) this employer? YES □ NO □ n:
Type: Type: Type:  EMPLOYMENT RECO Current/Last Employer		eet if more sp	Date Is  Date Is  Date Is  Dace i  ontact  Positio	ssued: ssued: ssued: ssued: s needed) this employer? YES □ NO □ n: employed:



evious Employer	May we contact this employer? YES $\square$ NO $\square$
Company name:	Position:
Reason for leaving:	Dates employed:
City and State	Salary:
	Company phone #:
Please describe job duties and respo	nsibilities:
revious Employer	May we contact this employer? YES $\square$ NO $\square$
Company name:	Position:
Reason for leaving:	Dates employed:
City and State	Salary:
	Company phone #:
Please describe job duties and respo	nsibilities:
NILITARY SERVICE: If you have	U.S. Military or Naval service, please provide the following:
ates of service:	Branch and Rank:
resent Membership in National Gua	ard or Reserves:
EFERENCES	
lease list at least three (3) profe	essional references.
oforonco #3 Namo:	Polationship



Company:	Phone No.:	
Address:		-
Reference #2 Name:	Relationship:	
Company:	Phone No.:	
Address:		-
Reference #3 Name:	Relationship:	
Company:	Phone No.:	
Address:		-
CRIMINAL BACKGROUND INVESTIGATION		
Bethlehem Manor is regulated by various agencies of Older Adults Protective Services Act (OAPSA) requires criminal offenses. OAPSA also requires applicants information with their application. Criminal history the attached form SP 4-164 (2-2013) or by going onling state of Pennsylvania continuously for the last two year criminal history records check, the applicant will also Check. For more information, please visit <a href="https://www.pa.cog">www.pa.cog</a>	s that employees of senior living facilities be s at senior living facilities to submit crimi records can be obtained from the Pennsylvania ne at <a href="https://www.psp.state.pa.us">www.psp.state.pa.us</a> . If any applicant hars, or currently lives out of state, in addition to need to obtain a Department of Aging FBI Crim	e free from certair nal history record a State Police with nas not lived in the to the Pennsylvania
Have you attached your criminal history record report $\hfill\square$ NO	from the Pennsylvania State Police to this app	lication?   YES

# **CERTIFICATIONS AND ACKNOWLEDGMENTS**

Please read each statement closely and initial each on the line next to the title, acknowledging your understanding. If clarification is needed, please contact Human Resources.

If you have not lived in the state of Pennsylvania continuously for the last two years, or currently live out of state, have you attached a Department of Aging FBI Criminal History Record Check to this application?  $\square$  YES  $\square$  NO



# **Equal Employment Opportunity Statement**

This Company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national

origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

#### Discrimination and Sexual Harassment Policy Statement

This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

## Disclosure to Applicants Concerning Drug/Alcohol Testing

If you are offered a position with the Company, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

#### **Complete and Accurate Information**

I confirm that the information I have provided is true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

## At-Will Employment

I understand and agree that if I am employed, my employment will be "at-will", which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or



implied to the contrary is hereby superseded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company's president. **Testing Authorization** If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment. **Background Investigation Authorization** I authorize investigation into all statements and references contained in this application. Said investigation may include interviews with past employers, workers and friends. Said investigation may include credit, driving, criminal background, references and other background checks. As a condition of applying for this job, I authorize reasonable post-hire investigations into my credit, driving and criminal background. **Company Obligation** I understand and agree that the Company's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the Company is under no obligation to hire me as the result of accepting this completed application. TO BE READ AND SIGNED BY APPLICANT This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. Applicant's Signature Date