

# **Apostolic Christian Village**

10680 Steiner Rd • Rittman, OH 44270 • (330)927-1010

## **APPLICATION FOR EMPLOYMENT**

Federal and state laws prohibit discrimination in employment because of sex, age, race, color, religious creed, marital status, national origin, ancestry, disability or handicap.

Name \_\_\_\_\_ Soc. Sec. # last 4 digits \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Position applied for \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

In case of an emergency notify \_\_\_\_\_

If under 18 years of age, do you have a work permit? Yes \_\_\_\_\_ No \_\_\_\_\_

If not a U.S. citizen, do you have the legal right to remain permanently and work in the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_ Alien Reg. No. \_\_\_\_\_

Do you have any illness which might prevent your performance in this job? \_\_\_\_\_

Have you been convicted of an offense or crime, or otherwise have been found guilty of an offense or crime that would preclude employment in a nursing home or long-term care facility in Ohio? Yes \_\_\_\_\_ No \_\_\_\_\_ Explain \_\_\_\_\_

### **EDUCATION**

Name and Location of Schools or Colleges	Major Subject	Did you graduate?	College Degree	Attendance From Date	Attendance To Date

### **FORMER EMPLOYERS AND EXPERIENCE (Reference)**

Name, Address and Phone	Nature Of Experience	Period From	To	Salary	Other Compensation	Reason for leaving

### **PERSONAL REFERENCES (Not Relatives)**

Name	Address	Phone	Business

I understand that any employment by this facility is "at-will" employment, meaning either the facility or you may terminate your employment at any time with or without cause or notice. Verbal promises of the employer to the contrary are not binding on the employer, nor shall policies, benefits, rules or regulations of the employer create express or implied contractual terms. If employed by Apostolic Christian Village, I agree to abide by its rules and regulations. The above information is complete and true to the best of my knowledge. I understand that discovery of misrepresentation or omission of facts herein, regardless of the date of discovery, may be cause for immediate dismissal. I authorize this facility to investigate all statements made in this application about my previous employment, education, and skills. I hereby release from liability all person, employers, companies/corporations, or schools supplying any information in connection with my application. I agree that employment will be conditioned upon successfully passing a pre-employment fitness for duty physical examination, pre-employment drug screening, and criminal background check and agree that the examining physician may disclose the findings to this facility or an authorized agent of this facility.