# MAIN STREET TERRACE CARE CENTER EMPLOYMENT APPLICATION

All applicants are considered without regard to their color, race, creed, religion, sex, pregnancy, age, national origin, ancestry, marital status, veteran status, military status, disability, family medical history, genetic information, or any other classification protected by federal, state and local law and ordinances. Disabilities and religious practices will be reasonably accommodated unless doing so would cause the company an undue hardship.

## Please print clearly or type

#### **GENERAL INFORMATION**

First Name	Middle Initial	Last Name	Social Security N	umber	
Street Address	City	State ZIP	Are you 18 yrs. of Age or	Are you 18 yrs. of Age or Older?	
Home Phone Number	r	Mobile Phone Number	Date of Birth		
Other names by whic	h you are known,	or have been known:			
Were you previously	employed by Mair	Street (if yes, give dates and	d location)?		
Position(s) desired:					
Are you legally authorized to work in the United States?			Yes	No	
Do you have reliable	transportation to v	work?	Yes	No	
Can you work on ever	nings and on week	ends?	Yes	No	
Can you work overtim	ne?		Yes	No	
What is you availabili	ty?		Full Time Pa	art-time	
How were you referre	ed to Main Street?	Agency In	ternet Employee	Other	
If a particular person	referred you to M	lain Street, who was it?			
Do you have any relat	tives employed at	Main Street?	Yes	No	
Who?					
Can you perform all o		ctions of the job(s) for which	Voc	No	

During the past 7 years, have you ever been conference of dishonesty?*	onvicted of, pled no contest to, or pled guilty to a Yes
Offense, seriousness and nature of vio	ily be a bar to employment. Factors such as age and time colations, and rehabilitation will be taken into account. Furth sealed or expunged record may answer "no" to this questic
If your answer to the last question was "yes," More space:	describe in full (use reverse side of this page if you need)
Are you currently using illegal drugs?	Yes
Have you served in the U.S. Military?	Yes
If you answer to the last question was "yes," li	st branches of military service:
<u> </u>	EDUCATION
High School:	Years Completed:123
College/ University:	Years Completed:123
Major:	Degree Obtain:
Graduate School:	Years Completed:123
Course of Study:	Degree Obtain:
Other School:	Years Completed:123
Course of Study:	Degree Obtain:
Are you currently attending school?	Yes
If your answer to the last question was "yes, "	what courses are you currently taking?
SKILLS	AND EXPERIENCE
Do you have any special experience, interest, o	or skills which qualify you for this job?

#### **EMPLOYMENT HISTORY**

Please fill in all information, starting with your most recent employer. Use the reverse side of this application if you need more space. Address: \_\_\_\_\_ Company: Telephone Number: \_\_\_\_\_ Type of Business: \_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_ Salary/Wage:\_\_\_\_ Supervisor: Reason for Leaving: Company: \_\_\_\_\_ Address: Telephone Number: Type of Business: Start Date: \_\_\_\_\_ End Date: \_\_\_\_ Salary/Wage:\_\_\_\_\_ Reason for Leaving: \_\_\_\_\_ Company: \_\_\_\_\_ Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_ Type of Business: Supervisor: \_\_\_\_\_ Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_Salary/Wage:\_\_\_\_\_ Reason for Leaving: Explain any periods of unemployment not accounted for above: How many days were you absent from work last year? REFERENCES List 3 professional or business references (not including relatives) who have known you for at least 5 years: How do they know you? Name **Telephone Number** Name Telephone Number How do they know you? Name **Telephone Number** How do they know you?

Are you currently employed?	Yes	No					
May we contact your current employer?	Yes	No					
APPLICANT'S STATEMENT	APPLICANT'S STATEMENT						
I certify that all answers on this Employment Application are true and complete. I understand that any misrepresentation or mission on my application or related papers, or during interviews, may result in refusal of employment, and may be grounds for immediate dismissal if I am hired.							
Main Street Terrace may investigate my history and background, and contact references, to verify my qualifications and to verify the information I have given in this application, in related papers, or during interviews. I permit Main Street Terrace to conduct such an investigation. I agree to release Main Street Terrace from liability, and also agree to release from liability all persons and companies who provide, or refuse to provide, information to Main Street Terrace relating to its investigation.							
I understand and agree that if I am hired, my employn terminated at any time without prior notice and for any re		-					
I understand that if I am extended a preliminary off of employment, I may be required to submit to a drug test and medical examination, and I agree to do so. If become employed by Main Street Terrace, I agree to undergo job-related medica examinations, including drug and alcohol testing, at any time when requested by Main Street Terrace. If I leave employment with Main Street Terrace for any reason I authorize Main Street Terrace to furnish information about my employment to persons seeking employment references about me, and I release from liability Main Street Terrace and all persons and companies who receive such information.							
I further understand that if I am hired, I will be required and legal authority to work in the United States and that require me to complete an I-9 form.	•	•					
I have read, understand and agree to the above.							

Date Signed

Signature

# **AUTHORIZATION TO RELEASE INFORMATION**

I,, having applied for employment with Main Street Terrace, and desiring that Main Street Terrace be informed fully of my background, authorize Main Street Terrace and its authorized agents to investigate all records which may be of interest to them. This authorization includes but is not limited to, references I have provided, my criminal and other court records (whether privileged on not). This authorization is signed in consideration of my possible employment with Main Street Terrace.							
By Signing below, I release from liability anyone who furnishes information about me to Main Street Terrace or its authorized agents. I understand that no information that is furnished to Main Street Terrace pursuant to this authorization will be used in violation of any federal or state equal opportunity law or other law regulation.							
A photocopy of this release shall be considered as effecting and bid as the original							
Signature							
Print Full Name							
List all of you addresses for the past 10 years (including county):							
Social Security Number:							
Driver's License Number:							
Driver's License State of Issuance:							
Driver's License County of Issuance:							
Today's Date:							

## **ACKNOWLEDGMENT REGUARDING DRUG AND ALCOHOL TESTING**

I understand that screening tests for alcohol and illegal drug use may be required if Main Street Terrace makes me preliminary offer of employment, and may also be required again during my employment if I am hired. I agree to submit to those tests. I also understand and agree that any offer of employment with be withdrawn if I change my mind and refuse to submit to a screening test for alcohol and illegal drug use.

Signature		
Date Signed		