

53131 Quince Road, South Bend, IN 46628 Phone: 574-235-8899 Fax: 574-235-8897

EMPLOYMENT APPLICATION

Please Print

APPLICANT INFORMATION					
Last Name	First		M.I.		Application Date
Street Address	Apartment/Unit		: # How I		ong?
City	State		ZIP		
Day Phone	Home/Cell Phone				
E-mail Address:					
Previous Address How long?					
Emergency Contact	Relationship Phone			Phone	
Position Desired	Desired Salary				
Applying for Full-time Part-time	Preferred Shift Length 6 hrs. 8 hrs. 10 hrs. 12 hrs.] 10 hrs. 🗌 12 hrs. 🗌	
Do you have any commitments to another employer that might affect your employment with us? YES NO					
Explain if Yes:					
GENERAL INFORMATION					
Can you, submit employment verification of your legal right to work permanently in the U.S.? YES 🗌 NO 🗌					
Have You ever been convicted of a felony, or pleaded no contest to a felony, or been convicted of a misdemeanor resulting in imprisonment or a fine? (criminal convictions are not an automatic bar to employment but will only be considered in relation to specific job requirements) YES NO					
If yes, please explain;					
Have you worked under another name? YES 🗌 NO 🗌 If yes, what?					
List any languages you speak fluently:					
Proficient in the following software:					

EDUCATION/TRAINING							
High School	Address	Address					
From To Did you gr	Did you graduate? YES 🗌 NO 🗌			Degree			
College	Address			1			
From To Did you gr	Did you graduate? YES 🗌 NO 🗌			Degree			
Other	Address						
From To Did you gr	Did you graduate? YES NO Degree						
PROFESSIONAL LICENSES, REGISTRATIO	NS AND/	OR CERTIFIC	ATIONS				
Type State Issued			Expirati	No.			
Type State Issued			Expirati	on Date		No.	
Area of Specialization or Major Interests							
Other special training (including on-the-job), skills, ex	periences o	r education which	n increases your va	alue to C	D'Hana and a Rosie Place	2	
Has your professional license/certification ever been s license or certification? YES NO	suspended o	r revoked, or are	you currently invo	olved in	any proceeding that cou	ld affect your	
MILITARY SERVICE				1			
Branch	Branch			From	То		
Rank at Discharge			Type of Discharge				
If other than honorable, explain							
EMPLOYMENT HISTORY (Give a complete record of all employment. Start with the most recent employment.)							
1. Employer Phone ()							
Address	Supervisor Name & Title						
Job Title Starting Salary			\$ Ending Salary \$				
Responsibilities							
From To Reason	Reason for Leaving						
May we contact your previous supervisor for a reference? YES NO							
2. Employer			Phone ()				
Address			Supervisor Name & Title				
Job Title Starting Salary			\$ Endii		Ending Salary \$		
Responsibilities							
From To Reason	Reason for Leaving						
May we contact your previous supervisor for a reference? YES NO							

3. Employer			Phone ()			
Address			Supervisor Name & Title			
Job Title Starting Salary			\$		Ending Salary \$	
Responsibilities						
From	То	Reason for Leaving				
May we contact your previous supervisor for a reference? YES NO						
REFERENCES						
Please list three professional references.						
Full Name			Relationship			
Company			Phone ()			
Address						
Full Name			Relationship			
Company			Phone ()			
Address						
Full Name			Relationship			
Company			Phone ()		
Address						
DISCLAIMER AND SIGNATURE						

Thank you for completing this application form and for your interest in working with us. A Rosie Place adheres to a policy of equal employment opportunity. All employment decisions are made without regard to race, religion, age, sex, color, national origin or handicap and in full compliance with all federal and state laws. Your opportunity for employment with us is based on your merit, past experience and your ability to perform the job. Further, any offer of employment may be conditioned upon the results of a medical examination, including a screening procedure of illegal drugs, which will occur before you begin work.

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I authorize A Rosie Place to investigate my background and to confirm information contained in this application and I release A Rosie Place and/or any other person, organization or institution from any and all liability that may result from any investigation into my background conducted by A Rosie Place.

I understand that misrepresentation or omission of facts on this application or any other A Rosie Place records will cause for rejection of my application or my immediate discharge should I be subsequently employed. Further, I accept that nothing in this application or in granting of an interview implies or should be understood as a promise of employment. Also, I understand that should I be subsequently employed by A Rosie Place I have the right to terminate my employment at any time and that A Rosie Place may at its discretion terminate at any time with or without cause.

Signature

Date

FOR A ROSIE PLACE OFFICE USE ONLY

References	
Reference 1	
Comments	
Reference 2	
Comments	
Reference 3	
Comments	
Certifications	
1	Expires:
2	Expires:
3	Expires:
4	Expires:
5	Expires:
Administrative Signature	Date

Employment Application Updated on 07/2015