



## APPLICATION FOR EMPLOYMENT

### *Personal Information*

<b>First Name</b>	<b>Last Name</b>	<b>Date of Application</b>	
<b>Address</b>			
<b>City</b>	<b>County</b>	<b>State</b>	<b>Zip</b>
<b>Home Phone</b>	<b>Alt. Phone</b>	<b>Social Security #</b>	

<b>Desired Position(s):</b>	1)	2)	
<b>Desired Employment Status:</b>	<input type="checkbox"/> Full Time (32 hours + per week) <input type="checkbox"/> Part Time <input type="checkbox"/> Contingent		
<b>Desired Shift:</b>	<input type="checkbox"/> 7-3 <input type="checkbox"/> 3-11 <input type="checkbox"/> 11-7 <input type="checkbox"/> 7am-7pm <input type="checkbox"/> 7pm-7am <input type="checkbox"/> Other _____		
<b>Date you can begin work:</b>		<b>Rate of Pay Desired:</b>	
<b>Can you work every other weekend?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>How were you referred to Columbus West Park?</b>			

Can you, upon employment provide lawful documentation establishing your identity and eligibility to be legally employed in the United States?  Yes    No

Are you under 18 years of age?  Yes    No

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

Are any of your relatives presently employed with this company?  Yes    No

If so, who? \_\_\_\_\_

Have you been convicted of any crime in the past 7 years?  Yes    No

If yes, please describe fully the criminal conviction(s), listing the nature of the offense, your age at the time of the offense, and your rehabilitation since the convictions. A conviction will not necessarily bar your employment with Columbus West Park, but nursing home regulations do require us to perform a criminal background check at the time of orientation, and set guidelines for employment eligibility. \_\_\_\_\_

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**An Equal Employment Opportunity Employer**  
**Columbus West Park is proud to be a Drug Free Workplace**

**Personal References**

<b>Name</b>	<b>Phone #</b>
<b>Address</b>	
<b>Name</b>	<b>Phone #</b>
<b>Address</b>	

**Educational Background**

	<b>School Name</b>	<b>City/ State</b>	<b>Major/Minor</b>	<b>Yrs Completed Or Diploma</b>	<b>Graduated Yes/No</b>	<b>GPA</b>
<b>High School</b>						
<b>College</b>						
<b>College</b>						
<b>Technical/ Business</b>						
<b>Graduate School</b>						

License/Certification Number: \_\_\_\_\_

List any job related training (i.e. nurse aide certification, activities certification, etc.), seminars, vocational or skilled training you have received that was not covered above: \_\_\_\_\_

\_\_\_\_\_

List any job related equipment that you have been trained to use, including computer software, if applicable: \_\_\_\_\_

\_\_\_\_\_

**Employment History**

Have you ever been employed at Columbus West Park?    Yes   No

If yes, please explain your reasons for leaving: \_\_\_\_\_

\_\_\_\_\_

**Complete the following for the last four places of employment, starting with the most recent. If there are other positions that you have held that you would like to include, please do so on the lines provided on the next page.**

<b>Dates of Employment</b>	<b>Company Name and Number</b>	<b>Supervisors Name</b>	<b>Job Title</b>	<b>Salary</b>
From: To:				Start: \$ _____ End: \$ _____
Describe Duties:				
Reason for Leaving:				
From: To:				Start: \$ _____ End: \$ _____
Describe Duties:				
Reason for Leaving:				
From: To:				Start: \$ _____ End: \$ _____
Describe Duties:				
Reason for Leaving:				
From: To:				Start: \$ _____ End: \$ _____
Describe Duties:				
Reason for Leaving:				

May we contact your present employer at this time? Yes No

Are you currently on "lay-off" status and subject to recall? Yes No

Other information you wish to provide regarding past employment experience: \_\_\_\_\_

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Give the reasons for jobs from which you were fired: \_\_\_\_\_

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***Notice to Applicants***

Columbus West Park places a high emphasis on safety, both for our employees, and to protect our residents. To maintain those high standards, we are a Substance Free Workplace. Any offer of employment is conditional, based on the outcomes of reference/license checks during the pre-hire process, and drug testing and a criminal background check during the probationary period.

***Applicants Statement***

I certify that the information contained in this application is true and complete to the best of my knowledge. I understand that if employed, false statements or omissions on this application are grounds for immediate dismissal upon delivery thereof. I authorize the references listed above to give you any and all information concerning my previous employment, and any pertinent information they may have personal or otherwise, and release all parties from liabilities for any damage that may result from furnishing the same to you. If employed by the Company, as an "Employee at Will" under Ohio Law, I agree to abide by the Company's Employee Handbook, rules and regulations. I also agree not to commence any action or suit relating to my employment by Columbus West Park Nursing and Rehabilitation Center more than six months after the date of termination of such employment, and to waive any statute of limitations to the contrary.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date