

# Employment Application

Position Desired

## Personal Information

First Name

Middle

Last Name

Address

Address 2

City

State

ZipCode

Social Security Number

Phone

Alternate Phone

Email

Date Available

If you previously filed an application with us, when?

Are you over twenty-one (21) years of age?

Birth Date (optional)

City of Birth

State of Birth

How did you learn of our organization?

If you are responding to and ad, which ad?

## Education

Name of High School

Did you graduate?

Address

City

State

ZipCode

Course of Study

Credits Completed

Degree

Name of College

Did you graduate?

Address

City

State

ZipCode

Course of Study

Credits Completed

Degree

## **Applicant's Statement**

By submitting this application, applicant agrees to the following:

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment and that my employment with the Company is at-will.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in my rejection as a candidate or discharge. I understand, also, that I am required to abide by all rules and regulations of the Company.

I understand that any offer of employment with the Company is contingent upon the results of a background investigation conducted by an outside investigator and I hereby authorize such an investigation to be made.

I also understand that if hired, I am required to provide documentation verifying employment eligibility.

I understand that my continued employment is dependent upon successful completion of the Company's training requirements, including but not limited to, orientation training required for all new hires.

If hired, I understand that a pre-employment physical examination may be required.

I understand and agree that I may be tested for job related reasons for the use or abuse of any controlled dangerous substance or alcohol at any time during my employment with the Company.

## References

Company Name

Phone

Address

City

State

ZipCode

From

To

Hourly Rate

Supervisor

Job Title/Description of Work

Reason for Leaving

Company Name

Phone

Address

City

State

ZipCode

From

To

Hourly Rate

Supervisor

Job Title/Description of Work

Reason for Leaving

## References

Company Name

Phone

Address

City

State

ZipCode

From

To

Hourly Rate

Supervisor

Job Title/Description of Work

Reason for Leaving

Precious Sapphires Healthcare, Inc. is an Equal Opportunity Employer. All applicants receive consideration without discrimination due to race, creed, sex, age, national origin, disability, sexual orientation, family status, veterans status, or any other characteristic protected under the law.