



Date: ___/___/___

Please Print Clearly

APPLICATION FOR EMPLOYMENT

Please Answer All Questions. Resumes Are Not a Substitute for a Completed Application

APPLICANTS WILL BE CONSIDERED WITHOUT DISCRIMINATION BECAUSE OF RACE, COLOR, AGE, RELIGION, NATIONAL ORIGIN, DISABILITY, VETERAN STATUS OR ANY OTHER BASIS PROHIBITED BY FEDERAL, STATE OR LOCAL LAW. GRH ALSO PROVIDES REASONABLE ACCOMMODATIONS TO QUALIFIED INDIVIDUALS WITH DISABILITIES IN ACCORDANCE WITH THE AMERICANS WITH DISABILITIES ACT (ADA) AND APPLICABLE STATE AND LOCAL LAWS.

Position applied for: _____ Social Security Number: _____

Name _____ Telephone Number: _____

Current Address: (Street, Apt or Unit No.) _____

City / State / Zip _____ Desired Salary: _____

Are you able at the time of employment, to submit verification of your legal right to work in the U.S.? Yes No (*Verification and completion of form I-9 must be submitted no later than three business days after date of hire*)

If you are a minor, can you produce the work certificate necessary to obtain employment? Yes No

Are you seeking Full Time or Part Time work? _____ What Shift? _____

What date are you available to begin work? _____

Have you ever been convicted of a felony? Yes No Note: *This question does not apply to convictions which have been expunged, sealed, pardoned, or otherwise exonerated or eradicated. (A conviction record will not necessarily be a bar to employment)*

If yes, to the above question, please describe fully, the criminal conviction(s), listing the nature of the offence(s) and your rehabilitation since the conviction(s). _____

List your computer, foreign language skills and work experience which you feel qualifies you for the job for which you are applying:

If a license is required for the position for which you are applying (drivers or professional) please list the following:

License Type: _____ License No.: _____

State of Issuance: _____

License Type: _____ License No.: _____

State of Issuance: _____

Education	School Name & Address	Course of Study	Graduate?	# of Years	Diploma / Degree Certificate
High School					
College					
Business/Tech./Trade Or Post College					

WORK EXPERIENCE

Please list below your last three (3) employers beginning with the most recent.

Name & Address of Company (Describe business type):

Employer Name _____ *Address* _____ *Type of Business* _____
 Phone # (____) _____ Dates Employed: From ____/____/____ To ____/____/____
 Job Title: _____ Supervisor's Name: _____
 Compensation: Starting \$ _____ Ending \$ _____ Reason for leaving: _____
 Job Duties: _____

Name & Address of Company (Describe business type):

Employer Name _____ *Address* _____ *Type of Business* _____
 Phone # (____) _____ Dates Employed: From ____/____/____ To ____/____/____
 Job Title: _____ Supervisor's Name: _____
 Compensation: Starting \$ _____ Ending \$ _____ Reason for leaving: _____
 Job Duties: _____

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Employer Name _____ *Address* _____ *Type of Business* _____
 Phone # (____) _____ Dates Employed: From ____/____/____ To ____/____/____
 Job Title: _____ Supervisor's Name: _____
 Compensation: Starting \$ _____ Ending \$ _____ Reason for leaving: _____
 Job Duties: _____

APPLICANT CERTIFICATION

I certify that all of the information on this application, my resume, and any supporting documents is complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, the immediate dismissal from employment.

I understand that this application is not a contract, offer, or promise of employment. I acknowledge that employment with Gulfside Regional Hospice (GRH) is on an "at-will" basis. This means that GRH is free to terminate my employment relationship at any time, with or without cause or advance notice and acceptance of employment is not a contract of employment for any specified time. Similarly, I am free to resign my position with GRH at any time and for any reason. This "at-will" provision may be modified or waived only with a written agreement signed by both an authorized GRH representative and me.

I authorize GRH or its agents to confirm all statements contained in this application and/or resume to the extent permitted by federal, state, and local law, and agree to complete any requisite authorization forms.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to GRH or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the employer and its representative for seeking such information and all other persons, corporations, or organizations for furnishing such information.

I understand that, as a condition of employment and to the extent permitted by federal, state, and local laws, I may be required to sign a confidentiality, non-compete and/or conflict of interest statement.

I understand that the GRH has a drug-free workplace and a drug and alcohol testing program consistent with applicable federal, state, and local law. Since GRH has such a program, if I receive a conditional offer of employment, I understand that if a pre-employment (post offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to GRH policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the employer's policies and applicable federal, state, and local law.

I understand that GRH hires only individuals who are legally eligible to work in the United States.

This application is current for only sixty (60) days. At the conclusion of this time, if you have not heard from GRH, and still wish to be considered for employment, it will be necessary for you to complete a new application.

Applicant Signature _____ Date _____

Print Name _____

May We Contact Your Employers: _____ May We Contact Your Supervisors _____

Comments:

Print Residences in the previous 7 years to include City & State:

(1) City: _____ State: _____ From: _____ To: _____

(2) City: _____ State: _____ From: _____ To: _____

(3) City: _____ State: _____ From: _____ To: _____

1. Have you ever been charged and or convicted of any crime or offense: Yes _____ No _____

2. Have you ever been involved in a Civil Action as the Plaintiff or Defendant: Yes _____ No _____

If you answered Yes to Numbers 1 or 2, provide the Case Numbers, Date of Action, County & State, Disposition and Current Status below:

Please explain. If more space is needed please use the back of this form to continue Explanation:

By signing below, you are certifying that the above information is true and correct:

Signature: _____ Date: ____/____/____