

What other special skills do you have or licenses do you hold that may be relevant to this position?

Are you aware of any limitations you may have which would limit your ability to perform the essential functions of the position(s) for which you are applying? _____ Yes _____ No

If so, please explain _____

EDUCATION Highest Grade completed (Circle)

8 9 10 11 12 Cert/Assoc Bachelors Masters

	Name of School	Location,(City, State)	Courses Taken	Diploma, Degree Or Certificate Received
Grammar or Grade School				
High School				
College or University				
Vocation/Technical School				
Other Training				

EMPLOYMENT HISTORY *(Please list all positions beginning with the most recent position first. If you need additional space, please attach an additional page)*

EMPLOYER NAME	DATE EMPLOYED	SALARY RANGE	TITLE DUTIES	REASON FOR LEAVING
Name _____ Address _____ _____ Supervisor _____ Telephone# _____ May we contact this employer for reference? _____ Yes _____ No	From _____/_____/_____ To _____/_____/_____	Starting \$ _____ Ending \$ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____

EMPLOYMENT HISTORY (Please list all positions beginning with the most recent position first. If you need additional space, please attach an additional page)

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Please list at least two personal references, not related to you, whom you have known at least one year:

Name *Phone Number*

Name *Phone Number*

If your former employment references or education are under a name other than that presented on the front of the application, please indicate:

Last *First* *Middle Initial*

Please provide the name(s) and positions of any relatives you have who work for Redington Memorial Home:

Name *Title* *Name* *Title*

Please list any additional information which will assist us in placing you:

Have you ever been charged with or investigated for physical and/or sexual abuse or harassment of another person? Yes No

Have you ever been convicted of a crime/misdemeanor? Yes No

Have you ever entered a plea of guilty or "no contest" to any crime? Yes No

If yes, please list approximate date, nature of offense, location, status and penalty. _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, please explain _____

Is there a criminal action currently pending against you? Yes No

If yes, please list approximate date, nature of offense, location, status, and penalty _____

Has any court ever deferred, filed, or dismissed proceedings without a finding of guilty and required that you pay a fine, penalty, or court costs and/or imposed a requirement as to your behavior or conduct for a period of time in connection with any crime? Yes No

Have you ever been convicted of a felony? Yes No

If yes, please explain _____

For VAN DRIVERS only:

Have you ever been charged with a traffic offense; or pleaded guilty or “no contest” to a traffic offense?

Yes _____ No _____

My signature below constitutes authorization to check my employment history, including the above and including without limitation, criminal arrest and conviction, record checks, reference checks, and release of investigative information possessed by any state, local or federal agency. I further authorize those persons, agencies or entities that Redington Memorial Home contacts in connection with my employment application to fully provide Redington Memorial Home any information on matters set forth above. I expressly waive in connection with any request for, or provision of such information, any claims, including the above and without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against Redington Memorial Home, its agents and officials or against any provider of such information.

I understand that information submitted in and with this application may be disclosed to a screening and/or interviewing committee, which may include Board members and Administrators.

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 acknowledge that I may be required to take a drug test at any time during my employment with Redington Memorial Home.

Finally, I understand that employment by the Redington Memorial Home is an at-will basis and that if employed, either the Redington Memorial Home or I may terminate my employment at any time, for any reason.

Applicant's Signature _____ Date _____

For Office Use Only:

Received: _____

Administrator's Signature: _____ **Date** _____