



Willamette Manor
ASSISTED LIVING

APPLICATION FOR EMPLOYMENT

Name: _____

Date: _____

Address: _____

City/State: _____

Telephone: _____

E-Mail _____

How may we contact you? _____

Position(s) applied for: _____

Referred By: _____

Citizen of U.S.? YES NO

Have you applied here before? YES NO

If so, when? _____

Have you worked here before? YES NO

If so, when? _____

Are you employed at this time? YES NO

Date available for work: _____

Do you seek full or part-time work? _____

Wage desired \$ _____

Work a flexible schedule? YES NO

What shift or hours do you prefer? _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? YES NO

Do you have a valid driver's license in this state? YES NO License # _____

Can you perform the essential functions of the job(s) for which you are applying? YES NO

Have you ever been convicted of abuse? YES NO

If yes, please explain _____

Have you pled guilty or been convicted of a felony? YES NO If yes, please explain: _____

We are a non-smoking facility. Would this bother you? _____

Do you enjoy working with the elderly and/or disabled? _____

Do you have special skills and/or qualifications related to the position for which you are applying? If so, please list them:

What experience have you had working with the elderly? Include volunteer work.

List any additional information you would like for us to consider:

Education History: *List most recent education first.*

School Name, City & State	Years Attended		Subjects of Study/Major
	From	To	

Employment History: *List your last three jobs. List most recent employment first. Do not omit any job.*

Company Name:	Address, City & State:
Supervisor's Name, Job Title & Phone Number:	Date Started & Wage: Date Ended & Wage:
Nature of Work and Job Responsibilities:	Reason for Leaving: May we contact? YES NO
What did you like most about your job?	What did you like least about your job?

Company Name:	Address, City & State:
Supervisor's Name, Job Title & Phone Number:	Date Started Work: Date Ended Work:
Nature of Work and Job Responsibilities:	Reason for Leaving: May we contact? YES NO
What did you like most about your job?	What did you like least about your job?

Company Name:	Address, City & State:
Supervisor's Name, Job Title & Phone Number:	Date Started Work: Date Ended Work:
Nature of Work and Job Responsibilities:	Reason for Leaving: May we contact? YES NO
What did you like most about your job?	What did you like least about your job?

Personal References:

Please list three references who are not related to you and have known you at least five years.

Name	Telephone Number	Years Known	Relationship

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

I will be responsible for familiarizing myself with all rules and regulations of the Employer as they presently exist or are later modified. I recognize that my employment can be terminated, at the discretion of the Employer or at my option, without notice, at any time. I further understand and agree that the Handbook does not constitute a contract of employment, and I do not have an express or implied contract with Willamette Manor

I also understand that no representative of the Employer has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a Collective Bargaining Agreement or a current individual written agreement signed by the Administrator.

I have read, understand and agree with the above statements.

Signature of Applicant: _____ Date: _____

This application is valid for only ninety (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from date signed, I will submit a new application.

Office Use Only

Comments: _____

Hire Date	Position	Reporting Date	Status (F/T, P/T, O/C)	Salary/Wage