



PARADISE PARK

ASSISTED LIVING & MEMORY CARE

"Welcome Home"



APPLICATION FOR EMPLOYMENT

Circle shifts that you are willing to work: 1st Shift 2nd Shift 3rd Shift Weekends

Wage or salary required:

Date available:

Educational History

School name	Location	Major Course	Dates attended		Graduated		Degree
			From	To	Yes	No	
High School							
College							
Other Training							

Outside Activities

(Exclude those indicating race, color, religion, sex, national origin, age, or handicap)

Professional Memberships, certificates, or licenses held	
Past and present civic cultural activities - include offices held	
Principal hobbies	
Special skills	
Please list others skills and/or equipment/language experience you have acquired.	Have you ever worked with the elderly?

All Assisted Living employees must submit to a background check. You must be willing to submit to a background check to assure you have not been convicted of any crime of abuse of a vulnerable adult, sexual abuse, incest, first or second degree murder, kidnapping, arson, sexual assault, sexual exploitation of a minor, contributing to the delinquency of a minor, commercial sexual exploitation of a minor, felony offenses involving distribution of marijuana or narcotic drugs, theft, robbery, a dangerous crime against children, child abuse, sexual conduct with a minor, molestation of a child, manslaughter, aggravated assault, domestic violence, fraud and fraudulent schemes, assault within the last five years or possession of a dangerous narcotic within the last five years.

Have you been convicted of a felony or misdemeanor in the last five years? Yes [] No []

If Yes, Explain: _____

Are you either a US Citizen or an alien authorized to work in the United States? Yes [] No []

Date of Last TB test or Chest X-Ray: _____

To the best of my knowledge all information provided on this application is true. I understand that providing false information on this application is grounds for termination.

Applicant Signature: _____ Date: _____

Please enter the date of completion for each item							
Freedom from TB Must be within 6 months of date of hire.	CPR Training	First Aid Training	Employee Physical	Administrator Training	Administrator License	Background Check	Fingerprinting Results (if applicable)

DO NOT COMPLETE BELOW THIS LINE

Applicant accepted for employment? • Yes • No If yes, what is the start date? _____

Date of Termination: _____

Interviewer's Impressions: _____

