



**PLEASE READ**

**IMPORTANT INFORMATION TO ALL APPLICANTS**

(all applicants must be 16 years of age to apply for employment.)

Dear Applicant:

To ensure that you will be considered for employment, you must provide ALL the information requested on the application. This includes the following;

- Positions for which you are applying.
- **Name, Address AND Telephone # of ALL previous employers.**
- Name, Address AND Telephone # of all character references.
- Dates of employment, reason for leaving previous jobs, and rate of pay.
- Date you will be available to begin working.

The back page must be signed and dated to validate the application.

**You may not be considered eligible for an interview or an opening/vacant position if you fail to complete this application in total.**

Once your application is submitted, it will be reviewed by a Manager or Supervisor to determine if your background and experience fulfill the requirements of the position(s) you are seeking.

**We request that you not come into or call the Village, the Human Resource Department or Manager/Supervisor to check on the status of your application. You will be contacted by our Human Resources Department or Manager/Supervisor if he/she wishes to arrange an interview with you. This process may take up to two weeks.**

**REHIRE INFORMATION**

If you have previously worked for Westminster Village North, Inc., please include all pertinent information on the application. This includes: dates of employment, position you held, department where you worked and reason for leaving. Rehire eligibility will be reviewed.

Previous employment does not guarantee re-employment.

Thank you for your interest in Westminster Village North, Inc.

The HR Department

# APPLICATION FOR EMPLOYMENT

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, use of lawful products during non-work hours and any other legally protected status.

**PLEASE PRINT PLAINLY.**

**REFERRED BY:** \_\_\_\_\_

## PERSONAL

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Last First Middle

Present address \_\_\_\_\_ Telephone # \_\_\_\_\_  
No. Street City State Zip (Other Phone #) \_\_\_\_\_

Have you worked under another name? If so, please list \_\_\_\_\_

Are you legally eligible for employment in the United States? \_\_\_\_\_ If hired can you furnish proof? \_\_\_\_\_

Position(s) you are primarily interested in: 1. \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ per hour  
2. \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_

Full-Time  Part-Time  Part-Time Summer Only

Were you previously employed by us?  No  Yes

If yes, please indicate position and dates of employment? \_\_\_\_\_

If hired, on what date will you be able to start work? \_\_\_\_\_

What hours and days of the week would you be available for work? \_\_\_\_\_

At any time, have you ever been convicted of or pleaded guilty or no contest to a **felony**?

No  Yes On Probation?  No  Yes

Have you been convicted of a **misdemeanor**, aside from minor traffic violations, within the last 7 years?  No  Yes

**Upon hire, WVN will conduct both state and county criminal background check.**

If YES to either, describe in full (including dates) NOTE: Convictions or guilty pleas or withheld adjudication's are not an automatic bar to employment. All circumstances will be considered. \_\_\_\_\_

Have you ever been excluded as an individual from participation in federal healthcare programs. Such as Medicare, Medicaid, Tricare/Champus?  No  Yes If yes, please explain \_\_\_\_\_

Have you ever been refused a bond by an employer?  No  Yes

Have you ever been discharged or asked to resign?  No  Yes If Yes, explain in full \_\_\_\_\_

## EDUCATION

	Name and Location of School	Course of Study	No. of Years Completed	Diploma of Degree Received
High School				
College				
Vocational or Trade School				
Graduate Work				

Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying?    Yes    No   If yes, please describe:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List academic honors, extracurricular activities, offices held, etc. in high school or college: (Omit any which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces?    No    Yes \_\_\_\_\_ If yes, what branch?

Dates of duty: From \_\_\_\_\_ To \_\_\_\_\_ Rank at discharge \_\_\_\_\_  
Month Day Year                      Month Day Year

List duties in the service including special training which relates to the position you are seeking: \_\_\_\_\_

Are you presently in the Armed Forces Reserve?  
 No    Yes    Active    Inactive   Branch \_\_\_\_\_

## CHARACTER REFERENCES

Refer to three people whom you know well either personally or in business. Do not refer to casual acquaintances, previous employers or relatives.

	NAME	ADDRESS	PHONE	NO. OF YEARS KNOWN
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____



## JOB ABILITIES

Indicate job skills you've acquired and equipment you can operate which pertains to the job for which you are applying. Include amount of experience.

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What qualifications, abilities and strong points will help you succeed in this job? \_\_\_\_\_

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**If required in the job for which you are applying:**

Do you have a valid driver's license?       No       Yes      Can you furnish proof?       No       Yes  
State and License Number \_\_\_\_\_

Do you have a valid CDL license?       No       Yes      Can you furnish proof?       No       Yes  
State and License Number \_\_\_\_\_

Has your driver's license ever been suspended or revoked?  
 No       Yes      If YES, Explain in full \_\_\_\_\_

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## AGREEMENT

I hereby certify that the facts set forth in the application are true and complete, and I agree that you may investigate my statements in order to verify and expand upon the information given.

I understand that as part of normal employment procedure, a routine inquiry will be made concerning information on my former job responsibilities, character, general reputation, and credit. I authorize such investigation and hereby agree to fully cooperate in this investigation. I release you and all named former employers, all character references, and credit sources, from any liability for releasing information to you.

**I understand that if I fail to answer any questions, or if I give misleading, false or incomplete answers to any question, that alone is a sufficient basis for my immediate termination.**

I further understand that this is an application for employment and that no employment contract is being offered. I agree and acknowledge that should I become employed by Westminster Village North, Inc. my employment can be terminated, with or without cause or notice, at any time by myself or Westminster Village North, Inc.

I have had a full opportunity to ask whatever questions I have about any of the above statements.

\_\_\_\_\_      \_\_\_\_\_  
Date      Applicant's Signature

### FOR OFFICE USE ONLY (To be completed after interview)

Interviewed By _____	Date Interviewed _____
Possible Positions _____	Recommended Action _____
Date Available _____	Referral Source _____



REQUEST FOR EMPLOYMENT REFERENCE

I hereby authorize release of any information regarding my performance from my previous places of employment. I release Westminster Village North from any liability in obtaining these references.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security # \_\_\_\_\_ Position \_\_\_\_\_

\*\*\*\*\*APPLICANT – DO NOT WRITE BELOW THIS LINE\*\*\*\*\*

The above named person has applied for a position at Westminster Village North and has listed you as a reference. We would appreciate your prompt reply to the following information which will be held in confidence. Thank you.

Company Name: \_\_\_\_\_ Position: \_\_\_\_\_

Employed From: \_\_\_\_\_ to \_\_\_\_\_

Salary: \_\_\_\_\_ Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Would you rehire: \_\_\_ Yes \_\_\_ No If no, please state reason: \_\_\_\_\_

Please rate the above named person on their work record:

Table with 6 columns: Quality, Quantity, Attendance/Punctuality, Dependability, Cooperation with Employees, Cooperation with Supervisor, Initiative/Creativity. Each row has 6 rating options: Excellent, Good, Average, Fair, Poor.

General Remarks and/or Comments: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Phone Number: \_\_\_\_\_

When the reference form is completed, please fold making sure the Westminster mailing address is visible. Staple, stamp and drop in the mail or fax.