



North Central

CARE & REHABILITATION

Application for Employment

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, other presence of a non-job-related medical condition or handicap.

PLEASE PRINT

Date: _____

Position (s) applied for: _____

Referral Source: _____

Name: _____

Last

First

Middle

Address: _____

Number

Street

City

State

Zip Code

Telephone: () _____ Social Security Number: _____

Professional License Number (if applicable): _____

If employed and you are under 18, can you furnish a work permit? _____ Yes _____ No

Have you ever been employed here before? _____ Yes _____ No If yes, give date: _____

Are you employed now? _____ Yes _____ No May we contact you present employer? _____ Yes _____ No

Are you prevented from lawfully becoming employed in the Country because of Visa or Immigration Status? _____ Yes _____ No

On what date would you be available for work? _____

Are you available to work: _____ Full-time _____ Part-time _____ Shift-work _____ Temporary

Have you been convicted of a felony within the last 7 years? _____

If Yes, Please explain: _____

EDUCATIONName/AddressYears CompletedDiploma/Degree

High School: _____

College/University: _____

Graduate/Professional: _____

Course of Study/Experience that is applicable to employment _____

State any additional information you feel may be helpful to us in considering your employment.

EMPLOYMENT EXPERIENCE: Start with your present or last job. Include military service assignments and volunteer activities.

Employer:	Dates Employed	Job Duties
Address:		
Telephone:	Hourly Rate/Salary	
Job Title:	Starting / Final	
Supervisor:		
Reason for Leaving:		

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If you need additional space, please continue on a separate sheet of paper.

Give name, address and telephone number of three personal references:

APPLICANT STATEMENT

I certify that answers given are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment. In the event of employment, I understand that false and misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

I understand and agree that:

1. Any material misrepresentation or deliberate omission of a fact in my application may be justification for refusal or, if employed, termination from employment.
2. It is my understanding that the company will make a thorough investigation of my entire work and personal history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving and receiving of any information, I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my employment, or if hired, may subject me to immediate dismissal.
3. I agree that my employment may be terminated by this Company at any time without liability for wages or salary except such as may have been earned at the date of such termination. If requested by the management at any time, I agree to submit to search of my person or of any locker that may be assigned to me, and I hereby waive all claims for damages on account of such examination. I authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the duties of a job I am being considered for, prior to employment or in the future, during my employment with the company.
4. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a work schedule other than Monday through Friday. I understand and accept these as conditions of my continuing employment.

I further understand that this is an application for employment and that no employment contract is being offered. I understand that if I am employed, such employment is for an indefinite period of time and that the company can change wages, benefits and conditions at any time.

I have read and understand the above.

Date: _____

Signature: _____

Disclosure Statement

Pursuant to the requirements for background inquiry in WAC 388-97-200, we will, upon employment, request that you complete a background inquiry that shall be processed through the WASHINGTON STATE PATROL. As required by law, your employment is conditioned upon the results of the inquiry. Please complete the following:

Have you ever been convicted of a crime against persons?

Yes _____

No _____

If you answered "yes", please describe and provide dates of the convictions below:

Have you ever been found by a court, a disciplinary board or in a dependency action to have financially exploited a vulnerable adult, or physically, or sexually abused a vulnerable adult or a minor?

Yes _____

No _____

If you answered "yes", please describe and provide dates of the findings and the penalties imposed.

Upon hire or shortly after, it may be necessary to obtain your finger prints to properly process the Background Inquiry. If you are hired before the results are returned, your continued employment shall be based on the receipt of a satisfactory report. You will be provided a copy of the WSP Background Inquiry within 10 days of NCCC's receiving the report.

Under penalty of perjury, I certify that the above information is true, correct and complete. I understand that if I am hired, I can be discharged for any misrepresentation or omission in the above statements.

Signature: _____

Print Name: _____

Date: _____