

Application for Employment

Lifeline of Berks County, Inc. is an equal opportunity employer.

(PLEASE PRINT)

Date of Application _____ Position (s) Applied For _____
Date Available to Start Employment _____ Salary Desired _____
Type of Employment Desired: _____ Full-time _____ Part-time _____ Temporary

Personal Information

Name _____
Last First Middle

Address _____
Number Street City State Zip Code

Phone Number _____ (Home) _____ (Cell)

Email _____

1. Have you ever been employed with this company before? ___ Yes ___ No
If Yes, give date: _____
2. Are you currently employed? ___ Yes ___ No
If Yes, may we contact your present employer? ___ Yes ___ No
3. Can you provide documentation to establish eligibility for employment as required by the INS? (Proof of citizenship or immigration status will be required upon employment.) ___ Yes ___ No
4. Have you ever been convicted of a felony? ___ Yes ___ No

If yes, please state the nature of the offense, when, where and disposition:

5. What is your reason for seeking employment here?

Education/Training

| | Name & Location | Circle last year completed | Graduate ? | Major/Degree Received |
|---------------------------------------|----------------------------|-----------------------------------|-------------------|------------------------------|
| High School | | 9 10 11 12 | Yes No | |
| College | | 1 2 3 4 | Yes No | |
| Nursing, Trade, Business, etc. | | 1 2 3 4 | Yes No | |
| Graduate Degree | | 1 2 3 4 | Yes No | |

Special Study/Internship/Research/Honors received:

Job Related Skills (licenses):

Job Related Activities/Professional Memberships/Offices held:

(You may exclude organizations, the name or character of which indicates race, gender, color, religion, national origin, or other protected status.)

References

Please provide three employment and two personal references

1. Name: _____ Telephone: _____

Address: _____

Relationship and years acquainted: _____

2. Name: _____ Telephone: _____

Address: _____

Relationship and years acquainted: _____

3. Name: _____ Telephone: _____

Address: _____

Relationship and years acquainted: _____

4. Name: _____ Telephone: _____

Address: _____

Relationship and years acquainted: _____

5. Name: _____ Telephone: _____

Address: _____

Relationship and years acquainted: _____

Employment Experience

| | | | |
|---|-----------------|---------------------|-------------|
| 1 | Employer: | From: | To: |
| | Address: | Ending Salary/wage | Job Title" |
| | Phone Number: | | Supervisor: |
| | Work Performed: | Reason for Leaving: | |
| 2 | Employer: | From: | To: |
| | Address: | Ending Salary/wage | Job Title" |
| | Phone Number: | | Supervisor: |
| | Work Performed: | Reason for Leaving: | |
| 3 | Employer: | From: | To: |
| | Address: | Ending Salary/wage | Job Title" |
| | Phone Number: | | Supervisor: |
| | Work Performed: | Reason for Leaving: | |

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

NOTES (additional job-related information):

Applicant's Pre-employment Statement

Please read carefully and sign the statement below.

I understand and agree that:

1. The information given herein is true and complete to the best of my knowledge. Any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire or, or dismissal if I have been employed, no matter when discovered by Lifeline of Berks County, Inc.
2. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision (including employment reference checking and background/credit check). I release my prospective employer and any person or entity providing such reference information from any and all liability relating to the provision of such information or relating to any employment decisions based upon such information.
3. This application for employment shall be considered active for a period of time not to exceed 180 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time.
4. Neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and me in writing. If I am hired, my employment will be "at will" and without fixed term and may be terminated at any time.
5. I am required to abide by all rules and regulations of the employer. I understand, also, that I must be willing and able to demonstrate commitment to Lifeline of Berks County's mission, vision, and core operational values in the execution of position responsibilities.
6. Completing this form does not indicate there is an available position and does not obligate Lifeline to hire me.

Signature of Applicant

Date