Application for Employment

<u>PLEASE TYPE OR PRINT</u>. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid job numbers will not be considered for any position.

Today's Date: / 2018 Position applying Name (Last, First, Middle): Other names under which you have attended school or for: been employed: Street Address: City, State & Zip: Social Security Number: Date of Birth: Home Phone: Other Phone: Are you eligible to work in the United Yes No States? Are you 18 years of age or older? Yes If NO, what is your current age? No Have you ever been employed by Yes No If YES, dates of employment & reason for leaving:? Willowbrook PCH? Are you related to any current employee Yes No If YES, their name & their relationship to you? at Willowbrook PCH? If required for position, do you have a Yes If YES, State of issuance, license #, and expiration □ No valid driver's license? date: How did you learn about us or this employment opportunity at Willowbrook PCH? Check all that apply: Ad in *newspaper* Dept. of Labor Friend or family member Job Bulletin (Posting) /Walk-in / Website Ad in *magazine* Referral by employee Other: **EDUCATION** Did you If No, # of If Yes, date Degree Name of School City/State graduate? vears left to of received Major graduate Graduation High School: Yes No GED: Yes No Other School: Yes No College: Yes No College: Yes No College: Yes No Other credentials/ licenses/ professional affiliations, etc., which are relevant to the job(s) for which you are applying.

ORK EXPERIENCE-Please de	tail your entire work history. Begin with	your <u>current</u> or most recent employer. If you
		. Attach additional sheets if necessary. Omi
	ered falsification of information. Please e PLEASE DO NOT complete this information.	xplain any gaps in employment. Include full
	CH reserves the right to contact all current	
ormation.	· ·	
Dates Employed (most recent		Title:
position)	☐ Full time ☐ Part-time	
From: To	If nort time # hrs /wik	
Starting Salary:	If part-time, # hrs./wk: Organization Name and Address:	
Starting Salary.	Organization Nume and Madress.	
Final Salary:		
Supervisor's Name, Title and	Other Reference Name, Title and	Contact my current references:
Phone #:	Phone #:	At any time
		Only if I am a finalist candidate
Primary duties:		Reason for Leaving:
Dates Employed (most recent		Title:
position)	☐Full time ☐ Part-time	
From: To	If part-time, # hrs./wk:	
Starting Salary:	Organization Name and Address:	
E: 10.1		
Final Salary:		
Supervisor's Name, Title and	Other Reference Name, Title and	Contact my current references:
Phone #:	Phone #:	At any time
		Only if I am a finalist candidate
Primary duties:		Reason for Leaving:

Dates Employed (most recent position) From: To	☐ Full time ☐ Part-time If part-time, # hrs./wk:	Title:
Starting Salary: Final Salary:	Organization Name and Address:	
Supervisor's Name, Title and Phone #:	Other Reference Name, Title and Phone #:	Contact my current references: At any time Only if I am a finalist candidate
Primary duties:		Reason for Leaving:
Dates Employed (most recent position) From: To	☐Full time ☐ Part-time If part-time, # hrs./wk: ☐	Title:
Starting Salary: Final Salary:	Organization Name and Address:	
Supervisor's Name, Title and Phone #:	Other Reference Name, Title and Phone #:	Contact my current references: At any time Only if I am a finalist candidate
Primary duties:		Reason for Leaving:
Tell us about you as a pers	on and employee:	

Have you ever been convicted of a felony, or other crime(s) besides moving violations? If so, Please list offense(s), dates and location
Willowbrook PCH is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications, and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.
PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION. I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Willowbrook PCH to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of Willowbrook PCH serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the Willowbrook PCH Retirement System or to an optional retirement program, if applicable. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represents a provisional period, during which I would not be eligible
 No call, No show, equals no job, no exceptions! If you are unable to come in for your shift, it is your responsibility to look at the contact list located in DRIVE to make arrangements with another staff member to cover your shift After trying to find someone to fill your shift and no one is available, then you contact management to cover your shift. If you miss a shift during your first 6 months of employment, without 12 hours prior notice to management, you must bring in a medical note from your Doctor. If you do not give two weeks' notice then your final check must be picked up from management. Failure to abide by these policies can lead to be written up, suspended and/or termination
By signing this application you consent to our policy of monitoring phone calls at this facility and the above stated policies, which do not represent all of the company's policies.
Applicant Signature: Date:
Email Address: