

[Hover Community Senior Living]

1380 Charles Drive
Longmont CO 80503

Phone: 303-772-9292
Fax: [303-651-7279]

Job Application

Personal Information

Last	First	MI	SSN#	Gender: Male _____ Female _____		
Street Address		City	ST	Zip	Home Phone	Mobile Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, Date of Birth	
Have you been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please explain:			
Full Time? <input type="checkbox"/> Yes <input type="checkbox"/> No			Part time <input type="checkbox"/> Yes <input type="checkbox"/> No			
What position are you applying for?			Hover Community is a Tobacco/Marijuana free community. Do you use any form of Tobacco, Marijuana, ecigarettes or Vaping? YES _____ NO _____			
Expected Hourly Rate	Expected Weekly Earnings	Date Available				

Prior Work Experience

	Current or Most Recent	Prior	Prior
Employer			
Address			
City, ST, ZIP			
Telephone			
Name of Immediate Supervisor			
Dates of Employment	From To	From To	From To
Position/Job Title			
Pay			
Reason for Leaving			
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Education

Name/Location	Last Year Complete	Degree	Major or Emphasis
High School	9 10 11 12		
College/University	1 2 3 4		
Trade School			
Other			
List any applicable special skills, training or proficiencies.			

Professional References different than listed above

	Reference 1	Reference 2	Reference 3
Name			
Address			
City, ST, ZIP			
Telephone			

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.	Signature	Date
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