

CEDAR CREST ESTATE, INC.

Employment Application

APPLICANT INFORMATION - REQUIRED - MUST COMPLETE ALL SECTIONS TO BE CONSIDERED FOR EMPLOYMENT

| | | | | | |
|--|--|------------------------------|-----------------------------|---|------|
| Last Name | | First | | M. | Date |
| Street Address | | | | Apartment/Unit # | |
| City | | State | | ZIP | |
| Phone | | Cell / E-mail / | | | |
| Date Available | | Social Security No. | | Desired Salary | |
| Position Applied for (Circle all that apply) HHA CNA TMA HOUSEKEEPING MAINTANCE COOK OTHER_____ | | | | | |
| Certification / Date of Certification _____ / _____ (Please provide a copy) | | | | | |
| Are you a citizen of the United States? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/> | |
| Have you ever worked for Cedar Crest before? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, when and where? | |
| Have you ever been convicted of a crime? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, explain | |
| Have you ever been convicted of a felony? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, explain | |

EDUCATION / CERTIFICATION

| | | | | | |
|-------------------------|----|-------------------|------------------------------|-----------------------------|--------|
| High School | | Address | | | |
| From | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| College / Certification | | Address | | | |
| From | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| College / Certification | | Address | | | |
| From | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |

REFERENCES - REQUIRED - MUST COMPLETE ALL SECTIONS TO BE CONSIDERED FOR EMPLOYMENT

Please list three professional references.

| | | |
|------------------|--|--------------|
| Full Name | | Relationship |
| Company | | Phone () |
| Address | | |
| Full Name | | Relationship |
| Company | | Phone () |
| Address | | |
| Full Name | | Relationship |
| Company | | Phone () |
| Address | | |

PREVIOUS EMPLOYMENT - REQUIRED - MUST COMPLETE ALL SECTIONS TO BE CONSIDERED FOR EMPLOYMENT

| | | | |
|---|--------------------|--------------------|--|
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |

MILITARY SERVICE

| | | |
|----------------------------------|-------------------|----|
| Branch | From | To |
| Rank at Discharge | Type of Discharge | |
| If other than honorable, explain | | |

DISCLAIMER AND SIGNATURE - REQUIRED - MUST SIGN TO BE CONSIDERED FOR EMPLOYMENT

I certify that my answers are true and complete to the best of my knowledge.
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|