



Employment Application-Please complete entire application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary:\$ _____

Position Applied for: _____

Date you can start? _____ Full Time: _____ Part Time: _____ Temp: _____

Other job interests: _____

How did you hear about us? _____

Professional License(s): _____

Other Education (including conferences, workshops, seminars, certifications) _____

Please list any honors, achievements, hobbies, or organizations (professional or social) _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

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

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 NO

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 NO

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 NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that the above information is true and correct and give authorization for investigation of all statements and information contained in this application, my resume, and other documents or verbally obtained during an employment interview. I voluntarily consent to allow ClearPath Home Health & Hospice or any of its representatives or agents to check my references by contacting any persons, company or governmental entity they deem to be an appropriate reference. I understand these questions may pertain to my personal or educational background, work experience, character and behavior. I understand my employment is subject to satisfactory verification of this information and agree that deliberate falsification of this document or significant omissions shall be grounds for employment consideration disqualification or dismissal from employment, if discovered at a later date. The following reports will be checked: The following reports will be: Systems of Awards Management, Office of Inspector General, Department of MRDD Abuser Registry, Sex Offender Search, Offender Search, Nurse Aide Registry, and National Sex Offender Registry Public Website. Upon hire a BCII/FBI will be completed

By applying to work at ClearPath Home Health & Hospice, I understand ClearPath is authorized to perform background checks and provide reports in conjunction with this job application. If hired, I understand this consent will apply throughout employment to the extent permitted by law, I authorize the reports and the results of the background checks to be released to the ClearPath Management hiring managers with a need to know.

I understand that completion of this Application for Employment does not imply or guarantee by ClearPath Management, Inc. All employment by ClearPath Home Health & Hospice is at-will and as such the relationship may be terminated by either ClearPath or myself, at any time, with or without notice and with or without cause. I understand that company policies, procedures, practices or statements made during an interview or employment do not create an employment contract by implication or otherwise.

Signature: _____ Date: _____