

**PIONEER PLACE
PIONEER NURSING HOME HEALTH DISTRICT
1060 D Street West
Vale, Or. 97918
541-473-3131**

**APPLICATION FOR EMPLOYMENT
Equal Opportunity Employer**

Each section and question must be fully and accurately answered. No action will be taken on an incomplete application. This application is current only for sixty (60) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application. Pioneer Place will make reasonable accommodations in the application process if needed.

GENERAL INFORMATION

Full Name _____

Address (Street) _____

City _____

State _____

Zip _____

Phone # (days) _____

Phone # (eves) _____

POSITION AND WORK SCHEDULE

Position sought: _____

Referred by (agency, newspaper, person) _____

Date available for work _____

Employment Preference: Full ___ Part ___ Temp ___ On Call ___ Shift Preference: 6am-2:pm ___ 2pm-10pm ___ 10pm-6am ___

Will you be able to work: Weekends? ___ Holidays? ___

Have you ever worked for this company before? If yes, when and where? _____

Please check if you are: Under 18 ___ (A work permit is required for employees between the ages of 16 and 18. Those under age 16 are not normally considered for employment.)

HEALTH INFORMATION

Are you capable of performing, with or without a reasonable accommodation, the essential functions of the job or occupation for which you have applied? A job description listing the essential functions of such job or occupation is attached.

Conviction of a crime is not an automatic bar to employment, but some jobs may not be held by persons convicted of certain crimes. Factors such as age of the offense, the seriousness and nature of the violation, and rehabilitation will be taken into consideration. Have you ever been convicted of abuse or any criminal offense other than a minor traffic violation? If yes, please explain:

EDUCATION AND SKILLS

Name of School

Address

Circle Last Year Completed

Degree or Subject

9 10 11 12

1 2 3 4

1 2 3 4

1 2 3 4

EMPLOYMENT HISTORY

Starting with your present or most recent employer, list employers, including self-employment, summer part-time.

Present Employer _____ Address _____ Phone _____

Supervisor: _____ May we contact? Yes ___ No ___ Dates employed: From _____ To _____ Ending salary \$ _____

Position _____ Starting job description _____ Ending job description _____

Reason for leaving _____

Former Employer _____ Address _____ Phone _____

Supervisor: _____ May we contact? Yes ___ No ___ Dates employed: From _____ To _____ Ending salary \$ _____

Position _____ Starting job description _____ Ending job description _____

Reason for leaving _____

Past Employer _____ Address _____ Phone _____

Supervisor: _____ May we contact? Yes ___ No ___ Dates employed: From _____ To _____ Ending salary \$ _____

Position _____ Starting job description _____ Ending job description _____

Reason for leaving _____

Have you ever worked under another name: If yes, please give the name you worked under and company(s) for which you worked:

PERSONAL REFERENCES

(Please do not list former employers or relatives)

Name

Address

Phone #

1. _____

2. _____

3. _____

Use the space below to describe your interest in our facility, along with the job-related skills and aptitudes you feel qualify you for a position with us. If you need more space, please continue on the backside of this sheet. You should exclude any information, which discloses that you are a member of a protected class.

PLEASE READ CAREFULLY BEFORE SIGNING

Pioneer Place is an equal opportunity employer and considers all applicants on the basis of job qualifications without regard to race, color, religion, age, sex, national origin, citizenship, disability, marital status, sexual orientation, veteran or current military status or family composition. Your application will be given every consideration, but our receipt of it does not guarantee that you will be employed. If you have any questions, the interviewer will be happy to help you.

I understand that any job offer that may be extended to me will be contingent upon the successful completion of a drug and alcohol test.

I certify that all the statements made by me on this application are true, complete, and correct to the best of my knowledge. This Employment Application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and, as applicable, information concerning my employment, education, general reputation, character, personal characteristics, and habits, and that such information may be developed through personal interviews with third parties such as family members, neighbors, friends, associates, former employers, financial sources, and custodians of official records. Only job -related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I understand that neither this application nor any written personnel procedure manual or employee handbook is an expressed or implied contract of permanent employment. I also certify that if employed, I will give at least 14 days written notice before terminating my employment. Such notice is a condition precedent to eligibility for all benefits other than pay for time worked. I further understand my relationship with Pioneer Place is "at-will" and for an unspecified term. Pioneer Place has the right to terminate the employment relationship at any time, with or without cause or advance notice.

I hereby acknowledge that I have read and understand the above statement. I have had an opportunity to have my questions about this statement's content and intent answered and understand its terms.

Signature of applicant

Date

EMPLOYEE INFORMATION RELEASE

I authorize Pioneer Place to release to any person, firm, entity or organization with which I may seek employment in the future, any truthful information concerning my work experience with Pioneer Place. I hereby release and hold Pioneer Place harmless from any claim for releasing any truthful information within its knowledge and/or records.

Signature of applicant

Date

I _____ agree that, as a condition of employment, I will not make copies or remove information from Pioneer Place, including forms and/or policies and procedures, without the express written permission of the Administrator.

Signature of applicant

Date