

APPLICATION FOR EMPLOYMENT FALL RIVER JEWISH HOME, INC.

The Fall River Jewish Home is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, national origin, age, disability, handicap, veteran status, or genetic information.

Date: ____/____/____

PERSONAL DATA:

1. Name: _____
Last First Middle

2. Social Security Number: _____ - _____ - _____

3. Street: _____

City: _____ State: _____ Zip Code: _____

4. Home Telephone #: _____ Business Telephone #: _____
Optional

5. How were you referred to us?

Newspaper Ad ____ Walk In ____ Agency ____ School ____ Employee ____
Website ____ Craigslist ____ Other ____

6. Are you legally authorized to work in the United States? _____ Yes _____ No
Note: If you are hired, you will be required to submit proof of legal right to work in U.S.

7. Are you over 18 years of age? _____ Yes _____ No

8. If no, are you over 16 years of age? _____ Yes _____ No

POSITION/AVAILABILITY:

1. Indicate the position for which you are applying: _____

2. Type of employment desired: Regular Full time _____ Part time _____
Temporary Full time _____ Part time _____
Per Diem _____

3. Shift desired: _____ Day _____ Evening _____ Night

4. Salary desired: _____

5. When could you start? _____

6. Have you ever worked for this company before? _____ Yes _____ No

If yes, please specify dates: _____

7. Have you ever applied for employment with this company before? _____ Yes _____ No
 If yes, please specify date: _____

EMPLOYMENT HISTORY:

1. List below the names of all your employers (you may list volunteer positions as well as paid positions, if you wish). List present employer or most recent employer first. You may use additional paper, if necessary.

EMPLOYER	ADDRESS	DATES OF EMPLOYMENT		REASON FOR LEAVING	TITLE/NATURE OF WORK	NAME/TITLE OF IMMEDIATE SUPERVISOR	REFERENCE CHECKED BY: COMPANY USE ONLY
		FROM:	TO:				

2. Are you employed now? _____ Yes _____ No
 If yes, may we inquire of your present employer? _____ Yes _____ No

3. Do you have any commitments to another employer which might effect your employment with us?

4. Are you subject to any restrictive covenants from prior employment such as agreements to protect confidential or proprietary information or agreements not to compete? If so, please explain.

REFERENCES:

Provide the following information regarding 3 persons **not** related to you who have known you longer than 1 year.

NAME	ADDRESS & PHONE #	BUSINESS	YRS ACQUAINTED	REF CK'D (CO. USE ONLY)

Type of School	Name & Address	Major/Course of Study	Graduated Y or N	Degree
High School:				
College:				
Graduate School:				
Trade/Business School:				
Other:				

MISCELLANEOUS:

1. Were you in the armed forces? _____ Yes _____ No
 - a. If yes, what branch? _____
 - b. Dates of Duty? From: _____ to _____
 - c. Rank at separation: _____
 - d. Briefly describe your duties: _____

Note: This Company does not discriminate on the basis of National Guard or Reserve Unit Duty obligations.

2. Please list any other information you think would be helpful to us in considering you for employment, such as organizations, activities, accomplishments, computer skills, etc. **Do not include** information indicative of age, sex, sexual orientation, race, religion, color, national origin, disability, or handicap.

AGREEMENT: (Please read the following statements carefully)

I certify that all information on this application and any other material provided by me are true and complete. I agree that falsified information, misrepresentation, or omission on this application, or any accompanying resume or other materials will disqualify me from consideration for employment and will be considered justification for dismissal whenever discovered. I also certify that I have no proposed or actual exclusions from federal payment programs.

Unless otherwise noted, I authorize this company or its agent to investigate and/or verify all information on this application, including contacting all persons, schools, current employer (if applicable), previous employers and other individuals or entities named herein (and those named on accompanying resume, if any). I hereby authorize my former employers and other third parties named on this application to release information pertaining to my work record, habits and performance. In doing so, I hereby release them and the Fall River Jewish Home and its agents from all liability which may flow from the release of such information.

I understand that if I am hired, my employment will be on an at-will basis, for no definite term. As such, I understand that I will enjoy the right to terminate my employment at any time, and that the Fall River Jewish Home will similarly enjoy the right to terminate my employment at any time, with or without cause. This status can only be modified by a written document setting forth such modification, signed by both me and an authorized representative of the Fall River Jewish Home. I further acknowledge that I am expected to abide by all company rules, regulations, and policies, written or unwritten, but that such rules, regulations and policies do not create a contract between me and the company or otherwise restrict the right of either party to terminate the employment relationship.

Date

Signature

NOTE: It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

REVISED: 03/2011