



PATHWAYS Assisted Living & Memory Care Neighborhood

NOTE TO CANDIDATE: The following information is needed to help make the best possible employment selection. All portions of this application pertaining to you must be completed. Pathways is committed to a policy of providing equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, age, gender, religion, national origin, marital status, physical or veteran status, disability, genetic information, or any other characteristic protected by law. If an accommodation is required, it is the responsibility of the candidate to inform the Human Resources. All final candidates for employment maybe required to submit to and pass a drug test prior to a final offer of employment.

(PLEASE PRINT) Name: _____ Date of Application ____ / ____ / ____

Position Applied For: _____ When will you be available to begin work? _____

Referral Source: Newspaper Internet Walk-in Employment Agency Other _____

Pathways employee (please specify who and relationship) _____

Do you have any relatives working here? Yes No

PERSONAL

Name _____ Date _____
Last First Middle

Address

Street City State Zp

Primary Phone: (____) _____ Alternative Phone: (____) _____

Email Address _____ Are you over 21 years of age? Yes No

Have you ever been employed by Sunshine Village? Yes No

If yes: From: _____ to _____ Department: _____

Applying For Regular Full Time: Yes No If no, what days & hours can you work? _____

Are you available to work the following shifts? First Second Third (Overnight) Weekends

Are you willing to work overtime, if needed? Yes No; Are you willing to work holidays? Yes No

Are you legally eligible for employment in the U.S.? Yes No (Proof of identity & eligibility will be required upon employment.)

EDUCATION

School	NAME & LOCATION OF SCHOOL	GPA	Course of Study	Did you graduate?	DIPLOMA/ DEGREE
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade/Vocational				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Other special training or skills:

EMPLOYMENT HISTORY

Please provide accurate and complete employment history, even if you attach a resume. Start with current or most recent employer. If this does not include all employers or employment history for at least the last 7 years, please attach another sheet.

Most Recent (or Current) Employer (Company Name)		Address, City, State, Zip	Telephone
Dates of Employment: From _____ To _____		Starting Title: _____	Ending Title: _____
Salary Start: _____ per _____	Salary End: _____ per _____	Ending (or current) Position: _____	
Name and Title of Supervisor: _____			
Description of Duties: _____		Reason for Leaving: _____	

Employer (Company Name)		Address, City, State, Zip	Telephone
Dates of Employment: From _____ To _____		Starting Title: _____	Ending Title: _____
Salary Start: _____ per _____	Salary End: _____ per _____	Ending (or current) Position: _____	
Name and Title of Supervisor: _____			
Description of Duties: _____		Reason for Leaving: _____	

Employer (Company Name)		Address, City, State, Zip	Telephone
Dates of Employment: From _____ To _____		Starting Title: _____	Ending Title: _____
Salary Start: _____ per _____	Salary End: _____ per _____	Ending (or current) Position: _____	
Name and Title of Supervisor: _____			
Description of Duties: _____		Reason for Leaving: _____	

May we contact employers listed above? Yes No If not, indicate by number, which ones not to contact: _____

Employment Gaps - Explain any gaps in your employment, other than those due to a personal illness, injury or disability: _____
Have you ever been asked to resign or involuntarily been terminated from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: _____
Military – Complete this section if you served in the US Armed Forces Branch of Service _____ Dates of Duty (exact) From _____ to _____ Rank at Discharge: _____ Date of Final Discharge: _____

CERTIFICATIONS/LICENSES/REGISTRATIONS (including expiration dates, etc.)

Verification will be completed based upon information provided.

Type	Effective Date	Expiration or Renewal Date

FOREIGN LANGUAGE (complete if applicable to the position – an assessment will be completed prior to hire)

Language	Proficient in Reading	Proficient in Speaking	Proficient in Writing
	Circle One: Fluent Conversationalist N/A	Circle One: Fluent Conversationalist N/A	Circle One: Fluent Conversationalist N/A

DRIVING RECORDS (for driving positions only)

Do you have a valid unexpired Arizona driver’s license: Yes No

Do you have access to a vehicle to use for business purposes, if applicable to the position? Yes No

Is there any reason that you would not be approved as a driver when a motor vehicle record report is run? Yes No

Is yes, explain: _____

CRIMINAL RECORDS

Have you ever been convicted of a crime(s), including misdemeanors, which has not been annulled, vacated, expunged or sealed by a court? Yes No If yes, explain in full:

*(NOTE: The conviction of a crime does not necessarily exclude a candidate from consideration of employment).

PERSONAL REFERENCES

List two personal references, which you have known at least one year. Please use family, friends, co-workers who are familiar with your personality. Only list people you want contacted.

Name	Telephone	Occupation / Business	Relationship	How Long Known

**APPLICANT ACKNOWLEDGEMENT OF TERMS AND
CONDITIONS OF APPLICATION**

In exchange for **Pathways** consideration of this employment application:

I certify that all information I have supplied in this application and any other form, oral or written is true and accurate, and I agree that any misstated, misleading, incomplete or false information is grounds for rejection of this application, refusal to hire or immediate discharge without recourse.

I understand and agree that **Pathways**, any agent acting on their behalf, as well as any other person responding to reference request pursuant to this application, can and will seek and/or disclose any and all information about me which **Pathways**, agent or agents, or persons may have. I specifically authorize said disclosure and agree to hold all such corporations, agents, or persons harmless for the same. That is, I will not file a lawsuit, claim or charge against them for such disclosure. Nor will I threaten same or otherwise seek any kind of compensation for such disclosure.

I understand and agree with the fact that **Pathways** maintains a drug-free workplace, that maintenance of it is essentially the safety of the workplace and employees, and that I may be required to undergo drug and/or alcohol screening and testing. I also understand and agree that I may be subject to such testing during the course of my employment, and I specifically agree not to oppose in any fashion such post-hire testing. I understand that, subject to applicable law, **Pathways** shall be the sole judge of the acceptability of any tests results. I also acknowledge that I have been advised that **Pathways** is an Equal Employment Opportunity/Affirmative Action Employer, that **Sunshine Village** does not discriminate against persons who are physically or mentally handicapped, and that **Sunshine Village** administers its employment policies in a nondiscriminatory manner.

I specifically authorize **Pathways** to investigate my background, including any and all references, available criminal and other judicial records, and my credit record, consistent with applicable law. I understand that **Pathways** will notify me if and when a credit record investigation is performed, and the sources investigated. I authorize **Pathways** to use all legal means at its disposal to assess my suitability for employment. I make this authorization in return for **Pathways** consideration of me for employment, and I specially release and hold **Pathways** harmless for any and all liabilities arising out of their investigation of my application for employment.

I understand and agree that, if hired, my employment will be at will, and that I or **Pathways** can terminate this employment relationship at any time, with or without notice, for any reason, good or bad, without recourse by either of us.

I hereby certify that I have read and understand the Terms and Conditions of this Application for Employment.

Applicant's Signature _____ Date _____

This application for employment will remain active for 30 days.

Equal Employment Opportunity