



APPLICATION FOR EMPLOYMENT

*Pre-Employment Questionnaire
Equal Opportunity Employer*

300 Talbot Drive
Moose Lake, MN 55767
218-485-8779 Phone
218-485-8808 Fax

Personal Information

Date: _____

Name (Last Name First)		Social Security Number	
Present Address	City	State	Zip Code
Permanent Address	City	State	Zip Code
Phone No.		Referred By	

Employment Desired

Position	Date you can start	Salary Desired
Are you Employed? <input type="checkbox"/> YES <input type="checkbox"/> NO	If so, may we inquire of your present employer? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever worked for an Assisted Living Facility <input type="checkbox"/> YES <input type="checkbox"/> NO	Where?	When?

Education History

Name & Location of School	Years Attended	Did you Graduate?	Subjects Studied
Grammar School			
High School			
College			
Trade, Business or Correspondence School			

General Information

Subjects of special study/research Work or special training/skills	
Have you had the two step mantoux Tuberculin skin test? If yes, when?	
Have you ever been convicted of a felony, a misdemeanor involving drugs or physical or sexual abuse, or a misdemeanor involving alcohol?	
U.S. Military or Naval Service	Rank
Do you have a valid driver's license?	Do you have a good driving record?

Former Employers (list below last four employers, starting with last one first)

See attached

Resume

Date Month and Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

References Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Known

I hereby give permission to contact the employers listed above concerning my prior work experience as indicated below:

Employer I? Yes ___ No ___ Employer II? Yes ___ No ___ Employer III? Yes ___ No ___

Signed _____ Date _____

May we telephone you to follow up on this application at home? Yes ___ No ___ If yes, what is the best time to call? _____

May we telephone you to follow up on this application at work? Yes ___ No ___ If yes, what is the best time to call? _____

What is your business telephone number? _____

I understand that by signing below I:

1) Certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

2) Authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

3) Understand that Oakview will not continue to employ me if the required criminal background history reveals information conflicting with my statement concerning conviction of a felony, a misdemeanor involving drugs or physical or sexual abuse, or a misdemeanor involving alcohol.

4) Understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

5) Understand this waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Date _____ Signature _____

Interviewed by _____ Date _____