



A community
of possibilities.

join us!

1130 North Westfield Street
Oshkosh, WI 54902

Phone: (920) 233-2340

Fax: (920) 237-2109

Affiliated with the
Wisconsin Conference
of the
United Methodist
Church

www.EvergreenOshkosh.com

Application for Employment

Position applying for _____ Date _____

How did you hear about this position?

Website: Evergreen Cumulus CareerBuilder

Other website: _____

Newspaper: Northwestern Buyers Guide

Other newspaper: _____

Job Fair School Friend

Employee Referral: Name of employee: _____

Other (please explain): _____

Personal Data

Name _____
First M.I. Last

Home Phone _____ Cell Phone _____

Address _____
Street

City State Zip Code

Email address _____

Social Security Number _____ - _____ - _____

What hours are you available for work? _____

How many hours per week are you able to work? _____

What days are you available to work? (circle all that apply)

All Mon Tues Wed Thurs Fri Sat Sun

Have you ever been employed by Evergreen Retirement Community before?

Yes No If yes, list dates: _____

If you have any relatives presently employed in a supervisory capacity at Evergreen Retirement Community, please list their names and departments _____

Are you legally eligible for employment in the U.S.? Yes No
(If yes, verification will be required)

Are you 18 years of age or older? Yes No

If no, state your age: _____

Are you or do you expect to be engaged in any other business or employment? _____

If yes, please explain _____

Educational Data

Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16+

School	Name & Location of School	Years Attended	Major Subject	Certificate Degree	G.P.A.
High School					
College					
Technical/Professional					
Other					

Employment Data

Falsification or omission of work history may be used as grounds for rejecting this application, or terminating your employment if you are hired. List all Full-, Part-time and temporary jobs you've had in the past 10 years or your last 10 jobs. Do not leave any time blank. If unemployed write "unemployed" and give dates. If in school give name of school and dates attended. If in Military list the branch and dates. Start with your present or most recent job.

1)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	
If current employer, may we call for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		

2)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

3)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

4)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

5)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

6)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

7)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

8)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

9)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

10)

Company Name		Telephone ()
Address		
Position (start)	Start Date (month/year)	
Position (end)	End Date (month/year)	
Immediate Supervisor	If quit, how many days notice given?	
Job Duties	Reason for Leaving	

Work Related References (List co-workers, including supervisors.)

1)	Name	Home Phone ()
		Work Phone ()
	Employer	Relationship
	Employer Address	How Long Known
2)	Name	Home Phone ()
		Work Phone ()
	Employer	Relationship
	Employer Address	How Long Known
3)	Name	Home Phone ()
		Work Phone ()
	Employer	Relationship
	Employer Address	How Long Known
4)	Name	Home Phone ()
		Work Phone ()
	Employer	Relationship
	Employer Address	How Long Known

Read carefully and acknowledge by signing and dating below

1. I certify that all statements made on this application are true and complete to the best of my knowledge. I have not withheld any information requested on this form. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent termination, whenever discovered. I agree that Evergreen Retirement Community, Inc. shall not be held liable in any respect if my employment is terminated because of false statements, answers or omissions made by me in this application.

2. I authorize Evergreen Retirement Community, Inc. to investigate my responses on this application and contact any or all above named companies, schools or persons for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I also authorize the companies, schools or persons named above to give any information requested regarding my employment, character and qualifications. I voluntarily and knowingly fully release and hold harmless said companies, schools or persons that provide information pertaining to me or my employment.

3. I understand that upon receiving an offer of employment, Evergreen Retirement Community, Inc. requires all prospective employees to pass a pre-employment drug screen and satisfactorily complete a pre-placement physical examination as conditions of employment.

4. I understand that regardless of whether or not I become employed by Evergreen Retirement Community, Inc., this application is not and should not be considered a contract of employment. I understand that if I am employed by Evergreen Retirement Community, Inc., my employment is on an at-will basis and that my employment can be terminated by Evergreen Retirement Community, Inc. or by me with or without cause and with or without notice, at any time. I further understand that no Evergreen Retirement Community, Inc. employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an Evergreen Retirement Community, Inc. Executive Team member, and then only by means of a signed, written document.

Applicant's printed name

Applicant's signature

Date

Evergreen Retirement Community, Inc. is an Equal Opportunity Employer