

Application for Employment as a Gerotech

Personal Information:

Last Name _____ First Name _____ Social Security Number _____ Driver's License Number _____ State _____

Present Address (Street, Apt., City, State, Zip) _____ Email Address _____
 Are you 18 years or older? _____ Are you legally able to work in the U.S.? _____
 Phone Number _____ Alternate Phone Number _____ yes no yes no

General Information:

Date you can start: _____ Salary desired: _____/hr How many hours would you like to work? _____

Are you willing to work: overtime, 1st shift, 2nd shift, 3rd shift, weekends, holidays

Have you ever applied to this company before: no, yes (when _____)

Who referred you to us? newspaper, friend, other (please list _____)

Education:

	Name and Address	Did you graduate	# Of years Completed	Diploma/GED/ Degree/Certificate
High School	_____	_____	_____	_____
High School	_____	_____	_____	_____
College/University	_____	_____	_____	_____
Are you trained in:	<input type="checkbox"/> CPR, <input type="checkbox"/> First Aide?			

Subjects of special study, special training, special skills: _____

Do you have any experience working with the elderly (if yes, please explain)? _____

Former Employers:

Name of present or last employer _____ Address/City/State/Zip _____ Type of Business _____

___/___/___ to ___/___/___ _____ weekly salary _____ Job Title _____ Reason for Leaving _____

Name/Title of Supervisor _____ Phone number (incl. area code) _____ May we contact your supervisor? yes, no

Description of work: _____

Former Employers:

Name of previous employer _____ Address/City/State/Zip _____ Type of Business _____

___/___/___ to ___/___/___ _____ weekly salary _____ Job Title _____ Reason for Leaving _____

Name/Title of Supervisor _____ Phone number (incl. area code) _____ May we contact your supervisor? yes, no

Description of work: _____

Former Employers:

Name of previous employer	Address/City/State/Zip	Type of Business	
____/____/____ to ____/____/____	_____	_____	_____
Dates of employment (month/year)	weekly salary	Job Title	Reason for Leaving
Name/Title of Supervisor	Phone number (incl. area code)	May we contact your supervisor? __ yes, __ no	
Description of work:			

References: (names of three persons you are not related to, whom you have known at least one year)

1:	_____	_____	_____	_____	_____
	Name	Address	Phone	Relationship to you	years known
2:	_____	_____	_____	_____	_____
	Name	Address	Phone	Relationship to you	years known
3:	_____	_____	_____	_____	_____
	Name	Address	Phone	Relationship to you	years known

Former Addresses:

Address	City, State, Zip	How long (from/to)
_____	_____	_____
Address	City, State, Zip	How long (from/to)
_____	_____	_____
Address	City, State, Zip	How long (from/to)
_____	_____	_____

Convictions:

Have you been convicted of a misdemeanor or felony or (or found guilty by DHHS or any administrative agency) of any abuse, assault, fraud, neglect, theft, exploitation, sexual assault, or other violent crime of any person in New Hampshire or any other State? Is there a current restraining order held against you?

__ yes __ no

(if yes, please explain. Will not necessarily exclude you from consideration) _____

Have you ever been excluded from participating in Medicaid by the Office of Inspector General (OIG)? __ yes __ no

Please ask how you may receive a credit for the \$25 criminal background check mandated by DHHS.

Authorization

I certify that the information given in this application is true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the Inn at Parker Station LLC from all liability for any damage that may result from utilization of such information. I understand that a consumer reporting agency's investigation may include obtaining information regarding my credit background references, character, past employment, work habits, education, general reputation, personal characteristics, mode of living, civil judgements, and liens. I also understand and agree that no representative of the Inn at Parker Station LLC 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.

09/2019

Date

Signature

