



# Integritas Employment Application

We are an Equal Opportunity Employer and do not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, gender, marital status, national origin, disability or handicap, or veteran status.

**Please read carefully before you sign this application. It must be completed in full, "see resume" is not acceptable.**

Full Legal Name: Today's Date:

Preferred Name: Home Phone:

Social Security #: Work Phone:

Home Address: Cellular Phone / Pager:

City/State/Zip: Email Address:

Position applying for: Pay Rate Expected:

What is your preference? Please mark all that apply.  Full Time  Part Time  PRN  Weekends Shift:  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>

On what date would you be available for work? Preferred work location:

Are you able to relocate?  Yes  No Can you travel if required?  Yes  No

Only US citizens or aliens who have a legal right to work in the US are eligible for Employment. Can you, upon employment provide genuine documentation establishing your identity and eligibility to be legally employed in the United States?  Yes  No

Have you ever been convicted of, pled guilty or nolo contendere or had adjudication withheld by the court, judge or jury for a crime that is a felony or a first degree misdemeanor?  Yes  No If yes, please explain:

*Answering "yes" does not constitute an automatic bar to employment. Factors such as date of offense, seriousness and nature of the violation(s), rehabilitation and position applied for will be taken into account.*

Have you ever been employed by the company or any affiliates?  Yes  No If yes, please complete the following:

Location: Title / Position:

Manager's Name: Dates Employed:

How were you referred to the company?

Newspaper Advertisement  Employment Agency  Job Fair

Internet Advertisement  Current Employee  Other

Please give the specific name of the referral source:

Do you have any relatives working for the company or any of our facilities?  Yes  No If yes, please complete the following:

Relative's Name: Relationship:

Position Held: Location:

Consistent attendance and punctuality are essential requirements of every position with this company. Is there anything that could interfere with your regular attendance and punctuality if you are offered a position with us?  Yes  No  
If yes, please explain:

Do you have any limitations, physical or otherwise, that preclude you from performing the functions of any job for which you applying?  
 Yes  No

**PREVIOUS EMPLOYMENT HISTORY**

Please list previous employment beginning with most recent employer for a minimum of the last five years.

1.	<b>Employer:</b>				<b>Phone:</b>					
	Street Address:				City/State/Zip:					
	Job Title:				Manager:					
	Dates Employed:	From		To		Pay Rate:	Starting		Ending	
	Reason for leaving:									

2.	<b>Employer:</b>				<b>Phone:</b>					
	Street Address:				City/State/Zip:					
	Job Title:				Manager:					
	Dates Employed:	From		To		Pay Rate:	Starting		Ending	
	Reason for leaving:									

3.	<b>Employer:</b>				<b>Phone:</b>					
	Street Address:				City/State/Zip:					
	Job Title:				Manager:					
	Dates Employed:	From		To		Pay Rate:	Starting		Ending	
	Reason for leaving:									

4.	<b>Employer:</b>				<b>Phone:</b>					
	Street Address:				City/State/Zip:					
	Job Title:				Manager:					
	Dates Employed:	From		To		Pay Rate:	Starting		Ending	
	Reason for leaving:									

5.	<b>Employer:</b>				<b>Phone:</b>					
	Street Address:				City/State/Zip:					
	Job Title:				Manager:					
	Dates Employed:	From		To		Pay Rate:	Starting		Ending	
	Reason for leaving:									

Have you ever been discharged or requested to resign from a position?  Yes  No If yes, please explain:

Please account for any GAPS in EMPLOYMENT other than while attending school:

Dates:		Reason:	
Dates:		Reason:	

**OTHER EXPERIENCE**

Please check the areas in which you have had experience or special training:

<input type="checkbox"/> Long Term Care	<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Microsoft Power Point
<input type="checkbox"/> Management	<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Microsoft Outlook

Please list any additional skills that apply:

**LICENSES & CERTIFICATIONS**

Please provide copies with your employment application.

Type of License or Certification:	State Issued by:	License or Certification #:	Expiration Date:

Have you ever had a certificate or professional license (related to the position you are applying for) revoked or suspended?

Yes  No If yes, please explain:

**EDUCATION**

	<i>School Name &amp; Location</i>	<i>Degree / Diploma / Certification</i>	<i>Field of Study</i>
High School:			
College:			
University:			
Graduate School:			
Other:			

**PROFESSIONAL REFERENCES**

Please list three professional references that have known you for at least one year.

Name:		Years Known:	
Relationship:		Phone Number:	
Name:		Years Known:	
Relationship:		Phone Number:	
Name:		Years Known:	
Relationship:		Phone Number:	

**This company does not discriminate in hiring or any other decision on the basis of race, color, sex national origin, ancestry, veteran status, or on the basis of age or physical or mental disability unrelated to ability to the perform the work required. No question on this application is intended to secure information to be used for such discrimination.**

I voluntarily give this company the right to make a thorough investigation of my past employment and activities, agree to cooperate in such investigation and release from all liability or responsibility all persons, companies or corporations supplying such information. I consent to take a physical examination, drug and alcohol test, and any future tests as may be required by this company at such times and places as relates to essential duties I would be required to perform. I understand that refusal to provide written consent or to submit to testing will result in my application no longer being considered for employment.

I have knowingly and voluntarily executed the Arbitration Agreement attached hereto.

I certify that the statements contained herein are true to the best of my knowledge and belief. I understand that any false or misleading statement, receipt of unsatisfactory references, drug or alcohol test, criminal background check or prescribed physical examination which reveals that I cannot perform the essential functions of my job with or without reasonable accommodation may prevent or result in termination of employment.

I understand that employment at this company is at will and that this company or I may terminate the employment relationship at any time, with or without cause. I further understand that neither this application nor any other company communication I may receive constitutes an employment contract.

<b>Applicant Signature:</b>	<b>Date:</b>
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**Our Mission**

**Our Vision**