



**OAKLAWN**<sup>®</sup>  
*Toward Health and Wholeness*

PO Box 809, Goshen, IN 46527-0809

# Application for Employment

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone # ( ) \_\_\_\_\_ Other Phone # ( ) \_\_\_\_\_ Email \_\_\_\_\_

Referred by:  Oaklawn Website  Newspaper Ad  Work One  Job Fair  Walk-In

Other(specify) \_\_\_\_\_  Employee \_\_\_\_\_  Website \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Date available \_\_\_\_\_

Type of employment desired  Full-Time  Part-Time  PRN

Salary desired \_\_\_\_\_ Shift(s) Preferred  Days  Eves  Nights

Are you legally eligible for employment in this country?  Yes  No

Languages:  English  Spanish  Other \_\_\_\_\_

Are you available to work overtime if required?  Yes  No

Are you available to work weekends if required?  Yes  No

Have you been employed at this company before?  Yes  No When? \_\_\_\_\_ Where? \_\_\_\_\_

As part of our company policy, it is standard procedure to perform a criminal background check on someone we are considering for employment. Would you object to such a procedure?  Yes  No

## EDUCATIONAL BACKGROUND

List previous high school /college educational institutions attended, beginning with the most recent.

SCHOOL	CITY, ST	GRADUATED?	DEGREE(S)/DIPLOMA(S) EARNED
			MAJOR
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

# EMPLOYMENT BACKGROUND

Provide the following information beginning with the most recent employer.

EMPLOYER	TELEPHONE ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		FROM	TO	
JOB TITLE		HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	per	
REASON FOR LEAVING		HOURLY RATE/SALARY FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	per	
EMPLOYER	TELEPHONE ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		FROM	TO	
JOB TITLE		HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	per	
REASON FOR LEAVING		HOURLY RATE/SALARY FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	per	
EMPLOYER	TELEPHONE ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		FROM	TO	
JOB TITLE		HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	per	
REASON FOR LEAVING		HOURLY RATE/SALARY FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	per	
EMPLOYER	TELEPHONE ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		FROM	TO	
JOB TITLE		HOURLY RATE/SALARY STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	per	
REASON FOR LEAVING		HOURLY RATE/SALARY FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	per	

List License(s) or certifications held: \_\_\_\_\_

**COMMENTS INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT:** \_\_\_\_\_

**PLEASE ANSWER THE FOLLOWING QUESTIONS**

What was the best job you've ever had? Why did you like it so much? \_\_\_\_\_

What was your least favorite job? What did you NOT like about it? \_\_\_\_\_

Who was the best supervisor or manager you've had? What characteristics made that person a good manager? \_\_\_\_\_

Think of the WORST supervisor or manager you've had. What characteristics made that person a POOR manager? \_\_\_\_\_

What are your greatest strengths? \_\_\_\_\_

As your skills and abilities relate to your work experiences, what are the areas for improvement? \_\_\_\_\_

What traits or characteristics do you most admire in co-workers? \_\_\_\_\_

What traits or characteristics do you most DISLIKE in co-workers? \_\_\_\_\_

If you won five million dollars in the lottery, would you choose to work? What would you do with your time? \_\_\_\_\_

What was the funniest thing that ever happened to you at work? \_\_\_\_\_

What do you think is the most difficult part of client / customer service work? \_\_\_\_\_

Imagine you have been on your feet and working hard all day. A client or fellow employee has a crisis that requires extra effort. What do you do? \_\_\_\_\_

## PROFESSIONAL REFERENCES

List the name, relationship, number of years acquainted, and phone number of three references. (No friends or relatives please).

NAME	RELATIONSHIP	YEARS ACQUAINTED	PHONE and E-MAIL CONTACT INFO
			Phone: (    ) E-mail:
			Phone: (    ) E-mail:
			Phone: (    ) E-mail:

Have you ever been convicted of a crime? **Circle one:** Yes or No

**If YES, please explain your answer on a separate sheet and attach to this application providing full details.** A “yes” answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law.

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer’s service, whenever it is discovered. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for 6 months. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer’s president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal Immigration laws require me to complete an I-9 Form in this regard.

\_\_\_\_ I understand that background checks have to be successfully completed in order to initiate and maintain employment.

Initial

**Applicant’s Signature** \_\_\_\_\_ **Date** \_\_\_\_\_