



EMPLOYMENT APPLICATION

To be completed by potential employee
and returned to facility director.

Sylvan Crossings is an equal opportunity employer.



We appreciate your interest in working for Sylvan Crossings. As an equal opportunity employer, our employment practices are in accordance with the laws that prohibit discrimination due to race, sex, sexual orientation, age, disability, or national origin. Please type or print the entire application and submit to the facility Director.

Date of Application _____

Name _____
Last First Middle

Address _____
Street City State Zip code

Email Address _____

Telephone No _____ Other Telephone No _____
Include area code Include area code

Are you a U.S. citizen? Yes No If naturalized, date of citizenship and country of birth _____

If no, type of VISA and expiration date _____ Alien Registration # _____

List any other names used _____

Position desired _____ Salary desired _____

Date available to start _____

Who can we thank for recommending us? Newspaper Ad School On my own Agency _____

Company Employee _____ Other _____
Name of employee & location

Have you ever pled "guilty" or no contest to, or been convicted of a crime? Yes No

If yes, please provide date (s) and details. _____

Have you ever been employed here before? Yes No If yes, give dates and location _____

EDUCATION AND TRAINING

	Name of School	City and State	Major Subject	Degree/ Diploma # of years attended
High School				
College/ University				
College/ University				
Other				

List Awards, scholarships, honors received _____,
 _____,

List professional certifications or designations, and date received _____,
 _____,

EMPLOYMENT HISTORY

This portion of the application must be completed even if a resume is submitted. Starting with the most recent employer, list full and part time jobs, summer or volunteer work during the last 10 years. Include periods of military service, self-employment, and unemployment. Please leave no unexplained gaps. Attach separate sheet if necessary.

1	Last or Present Employer	Telephone
	Address	Employed (Month and Year) From _____ To _____
	Supervisor's Name and Title	Earnings Start _____ Last _____
	Job Title	Reason for leaving
	Describe your work	

2	Last or Present Employer	Telephone
	Address	Employed (Month and Year) From _____ To _____
	Supervisor's Name and Title	Earnings Start _____ Last _____
	Job Title	Reason for leaving
	Describe your work	

3	Last or Present Employer	Telephone
	Address	Employed (Month and Year) From _____ To _____
	Supervisor's Name and Title	Earnings Start _____ Last _____
	Job Title	Reason for leaving
	Describe your work	

We may contact the employers listed above unless you indicate those you do not want us to.

Employer _____ Reason _____

REFERENCES: PROFESSIONAL COLLEAGUES

Name	Employer/Position	Address	Phone Number

This application will be kept in the Company's active files only until the position for which it was submitted is filled. If the applicant is not hired, the applicant must complete a new application to be considered for employment.

I hereby authorize the Company, whether on its own or by and through an agent, to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment, such as criminal convictions, and, further, authorize my present employer or any former employer or any other party, including any Government or law enforcement agency and the references I have listed, to disclose to the Company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure, except those which would indicate age, race, creed, color, sex, sexual orientation, or national origin. In addition, I hereby release the Company, my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. I agree to abide by all rules and regulations of the company, and I understand that false statements or consequential omissions of any kind are sufficient grounds for denying employment or for dismissal when discovered.

If I am hired, I understand my employment is "at-will". I understand that either I or the company may terminate the employment relationship, for any reason or for no reason, at any time with or without notice, regardless of the length of my employment or the granting of benefits of any kind, including but not limited to benefits which provide for vesting based on length of employment.

I have read and understand the above statement. This application is complete and accurate to the best of my knowledge.

Signature _____ Date _____

