



Employment Application

We consider applicant for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information, or any other legally protected status.

Last Name, First Name, Middle Name

Date:

Position(s) of Interest:

How Did You Hear About Us?

Referred by MHHC Employee: _____ If yes, list name of referring employee: _____
Social Media _____ Relative _____ Friend _____ Employment Agency _____ Radio _____
Other _____

Address

City

State

Zip Code

Primary Number:

Cell Phone:

Best Time to Contact

Social Security Number (Voluntary)

Employment History: *(We will contact the three most recent, for a reference verification)*

Job Title:

Hourly Rate:

Supervisor:

Employer:

E-Mail:

May We Contact?

Address:

Telephone Number:

Dates of Employment:

Reason for Leaving:

Job Duties Performed:

Job Title:	Hourly Rate:	Supervisor:
Employer:	E-Mail:	May We Contact?
Address:	Telephone Number:	
Dates of Employment:	Reason for Leaving:	

Job Duties Performed:

Job Title:	Hourly Rate:	Supervisor:
Employer:	E-Mail:	May We Contact?
Address:	Telephone Number:	
Dates of Employment:	Reason for Leaving:	

Job Duties Performed:

Job Title:	Hourly Rate:	Supervisor:
Employer:	E-Mail:	May We Contact?
Address:	Telephone Number:	
Dates of Employment:	Reason for Leaving:	

Job Duties Performed:

Education:

College:	Diploma/Degree Earned	Date(s)
Undergraduate:	Diploma/Degree	Date(s)
High School/GED		Date(s)

License(s) or Certificate(s)

Description:	Number:	Renewal Date(s)
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Training – Skills

Additional Information – Qualifications

Please Answer the Following:

Date available for work? _____ / _____ / _____

Full Time _____ Part Time _____ PRN _____

What are your salary expectations? \$ _____

If you are under 18 years of age, can you provide required proof of eligibility to work? **YES NO**

Are you currently employed? **YES NO**

If your 3 most recent employers do not answer,
Can you provide at least 3 professional recommendation letters? **YES NO**

Are you willing to travel, if needed? **YES NO**

Can you perform the essential functions of the job, for which you are applying for? **YES NO**

Are you currently on 'lay-off' status and subject to recall? **YES NO**

Have you ever applied with us before? If yes, when? _____ **YES NO**

Have you ever been employed with us before? If yes, when? _____ **YES NO**

Do you have family or friends who work here? **YES NO**

Are you prevented from lawfully becoming employed in this country because of
Visa or Immigration Status? **YES NO**

Have you ever been convicted of any criminal charges? **YES NO**

If you hold a professional license or certification, is it in good standing? **YES NO**

Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment, as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time, not to exceed 45 days. Any applicant wishing to be considered for employment after this time period should inquire as to whether or not application(s) are being accepted at this time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an 'at will' nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

I understand that I am required to abide by all rules and regulations of the employer.

Applicant's Signature:

Date:

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