



Sapphire Lutheran Homes, Inc.

Application for Employment

Position Applied For

Date of Application

First Name

Last Name

Middle Initial

Street Address

City

State

Zip Code

Telephone Number

Social Security Number (voluntary)

Best time to contact you at home is:

a.m.

p.m.

Have you been employed with us before?

yes

no

If so, when ?

Do any of your friends or relatives work here?

yes

no

If yes, state name and relationship

Are you currently employed?

yes

no

May we contact your current employer?

yes

no

Are you prevented from lawfully becoming employed in the USA?

yes

no

Date Available for work?

What is your desired wage?

\$

Are you applying for:

Full Time

Part Time

Have you been convicted of a crime in the past seven years?

yes

no

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Describe any specialized training, skills and extra-curricular activities.

Describe any job related training received in the Military.

List professional, trade, business or civic activities and offices held.

State any additional information you feel may be helpful to us in considering your application.

Note to Applicant: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

yes no

Personal/Professional References (Do not include family members or past supervisors)

Name	Phone Number	Occupation

Education

School	Name of School	Course of Study	Degree/Diploma
High School			
Undergraduate			
Graduate/Professional			
Other (specify)			

Work Experience

Start with your present or last job. Include any job-related military assignments and volunteer activities. You may exclude organizations which indicate race, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Worked Performed
Address	From	To	
Telephone			
Starting/Present Job Title	Hourly Rate/Salary		
Supervisor	From	To	
Reason for leaving			
Employer	Dates Employed		Worked Performed
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Telephone			
Starting/Present Job Title	Hourly Rate/Salary		
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Reason for leaving			

Applicant's Statement

I certify that the 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 beyond this time period should inquire as to whether or not applications are being accepted at that 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. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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, also, that I am required to abide by all rules, regulations and policies of the employer.

Signature of
Applicant

Date