

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true 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 (a) cancel further consideration of this application, or (b) 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 this application remains on file for one year. 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. I understand that 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 Chief Executive Officer. 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 immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Name: _____

Signature: _____

Date: ____/____/____

Please provide your social security number and driver's license number (if driving is an essential job function).

Social Security Number: _____

Driver's License Number: _____

Issuing State: _____

Criminal Note Statement

I, _____, an applicant for employment with Larchwood Village Rehabilitation Center, do hereby attest to the fact that I have not been convicted of or plead guilty to any of the offenses listed below wither in the State of Ohio or any other state: