

APPLICATION FOR EMPLOYMENT

BEECH TREE MANOR

Name _____

Date _____

Please indicate the position(s) for which you wish to be considered. Applicants are considered only for specific positions. (do not list "any")

1. _____

2. _____

3. _____

APPLICATION FOR EMPLOYMENT

DATE: _____ POSITION APPLIED FOR: _____

Referred by: _____ Date Available for Work: _____

INSTRUCTIONS: Please read carefully. Every item on this form must be answered to the best of your ability. Please print and use a pen. Your qualifications will be carefully reviewed and you will be given thorough consideration for the position(s) for which you have applied. Upon employment, this application will become part of your permanent record at Beech Tree Manor. Keep this in mind as you complete it. Special Note: You are not required to supply any information that is prohibited by Federal, State, or Local law. We are an Equal Opportunity Employer. Beech Tree Manor does not discriminate on the basis of race, color, religion, gender, national origin, pregnancy, marital status, citizenship, age, disability, veteran status, or any other legally protected class. You may request assistance in completing this application.

PERSONAL

Name _____ Telephone Number: () _____

First M.I. Last Street Box City ST Zip

Cell/Digital Phone _____ E-Mail Address _____ @ _____

If younger than 21, state your age here _____ Are you legally entitled to work in the United States? ** yes no

**Compliance with I-9 requirements is mandatory, upon employment

If convicted of a crime(s), explain here: _____ No convictions (A criminal conviction may or may not prohibit you from employment here)

Have you ever been convicted of a moving traffic violation? yes no If yes, list all here: _____

Have your driving privileges ever been revoked or suspended? yes no If yes, list here when and why: _____

Do you currently hold a Commercial driving license (CDL)? yes no

EDUCATION

High School (Name and Address) _____

Did you graduate? _____ If no, last grade completed _____ G.E.D. Obtained? _____ Grade Average _____

Colleges (Name and Address) _____

Please initial here to certify that your college degree was earned through the actual completion of college level course work and conferred by an accredited college or university. _____

Colleges (Name and Address) _____

Did you graduate? _____ If no, number of hours completed _____ Grade Point Average _____ Degree _____

Major _____ Minor _____ If attending, date of graduation _____

Other Education _____

License(s), including the state of issue and the number: _____

MILITARY not applicable

List service in U.S. Military: From _____ to _____ Branch _____

Rank at Discharge _____ Military experience that may be applicable to working here _____

GENERAL EMPLOYMENT INFORMATION

1. List here all of the equipment with which you have experience and training. (Examples: cash register, small tools, forklift, word processor, calculator, computers, etc.): _____
2. Are you willing to relocate? _____ If yes, state location preferred _____
3. Salary Expected _____ hour _____ or week Number of hours you are available per week? _____ No preference
4. Type of work sought: regular full time regular part time temporary seasonal as needed
5. Which of the following are you available: Days: yes no Nights: yes no Weekends: yes no
Holidays: yes no Shift Work: yes no
6. Indicate hours you are available to work on the following days (or check *Anytime*, if you have no restrictions):

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____
<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime
7. Are you able and willing to perform the essential functions of the job for which you are applying, including travel, if necessary? yes no don't know
 •If no, indicate reason: need different hours need different days need more training change in duties
 Other, (explain accommodation needed:) _____
8. Are you currently under any covenant or agreement that will prevent you from working for any business in our industry?
 yes no If yes, please explain and list the date the agreement expires: _____

.....
EXPERIENCE: List below all present and past employment, beginning with your most recent employer

1. Employer _____ Starting Salary _____ per hour or week
 Address _____ Last Salary _____ per hour or week
 Kind of Business _____ Supervisor _____
 Job Title _____ Reason for Leaving: Quit Discharge Retired
 Dates Employed _____ to _____ Laid Off Why? _____
 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____
 ...
2. Employer _____ Starting Salary _____ per hour or week
 Address _____ Last Salary _____ per hour or week
 Kind of Business _____ Supervisor _____
 Job Title _____ Reason for Leaving: Quit Discharge Retired
 Dates Employed _____ to _____ Laid Off Why? _____
 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____
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 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____
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 Address _____ Last Salary _____ per hour or week
 Kind of Business _____ Supervisor _____
 Job Title _____ Reason for Leaving: Quit Discharge Retired
 Dates Employed _____ to _____ Laid Off Why? _____
 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

In the following space, please describe how our company will benefit from your work here.

Please list the name, address and contact information of three references who can attest to your knowledge, skill and ability to perform the work for which you are applying. We are seeking business related references, not personal references.

Name: _____ Phone No. (____) _____

Employer: _____ Location: _____ Position: _____

Name: _____ Phone No. (____) _____

Employer: _____ Location: _____ Position: _____

Name: _____ Phone No. (____) _____

Employer: _____ Location: _____ Position: _____

CONDITIONS OF EMPLOYMENT

- I. The facts as stated on this application are true and correct. I understand that, if employed, false statements on this application may cause my immediate dismissal.
- II. I authorize whatever background and personal reports needed to verify that the information I have supplied is true and accurate and to determine my fitness for this job and hold harmless those who have the responsibility to develop such a report. A copy of this authorization is as valid as the original.
- III. I understand that I may be required to work overtime as a condition of being employed.
- IV. In consideration of my employment, I agree to conform to the rules and regulations for employees. I understand I am an employee at-will, and that this application is not a contract of employment with Beech Tree Manor, and that my employment and compensation can be terminated, with or without cause, at anytime, at the option of either Beech Tree Manor, or me. I understand that no representative of Beech Tree Manor, has any authority to enter into any verbal agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and that no document, policy or practice of Beech Tree Manor, may change the foregoing unless it is expressly titled "Contract" and signed by the person authorized to engage in contracts for Beech Tree Manor.
- V. I understand that I will be required to submit to a pre-employment, and/or post-employment test for fitness and/or substance abuse, if not prohibited by federal or local law.
- VI. Upon separation of employment, I authorize Beech Tree Manor, to withhold from my final pay check any monies owed by me (if not prohibited by law) for equipment, loans, products, services, uniforms unreturned, benefits advanced that I have not earned, materials or other assets in my possession not promptly returned or repaid as agreed.
- VII. As a condition of employment, I accept that any complaint or conflict that cannot be resolved internally may be referred to Alternative Dispute Resolution, unless prohibited by law.

DATE _____ SIGNATURE _____

PERMISSIBLE PURPOSE RELEASE FOR CREDENTIALING
(THIS FORM MUST NEVER BE ATTACHED TO THE APPLICATION OR RESUME)

INSTRUCTIONS TO APPLICANT: Please read the following information carefully and complete all of the information requested. Be sure you sign and date this form.

As a condition of employment with Beech Tree Manor. I understand that consumer reports/ investigative consumer reports, which may contain public record information, may be requested or made on me including financial, criminal, driving record, education, prior employer verification, and others. Further, I understand that you may be requesting information from records of various Federal, State, local and other agencies that contain my past activities.

I hereby authorize without reservation, any party or agency contacted by Beech Tree Manor to furnish the above mentioned information and hold all of those involved in this process harmless for the information furnished and decisions made. I understand that I have the right to make a request of the third party that may be used in this investigation, and upon proper identification and the payment of any authorized fees, obtain copies of the findings in its files on me at the time of my request. I further authorize ongoing procurement of the above-mentioned reports at any time during my employment.

Signature _____ Date _____

IMPORTANT: Please print clearly. This information will be used to conduct the background search and errors may delay the employment process or cause misinformation to be reported about you. This information will be carefully protected and used only for the purpose for which it is being submitted.

Print your name _____

Street Address _____ City _____ ST _____ Zip Code _____

Social Security Number _____ Date of Birth: ___/___/19___

Former Names Used _____ Gender: Male ___ Female ___

College: _____ Year Graduated _____ Degree _____ Major: _____

College: _____ Year Graduated _____ Degree _____ Major: _____

Professional License State _____ Type _____ License Number _____

Drivers License State of Issue: _____ Drivers License Number _____

.....
For Employer Use Only: Send Results to: _____ FAX: _____

Name of Company: _____ Email Address: _____

Reports Requested:

- | | |
|--|---|
| <input type="checkbox"/> Pre-Employment (PEER): | <input type="checkbox"/> Personal Driver's License (MVR): |
| <input type="checkbox"/> Commercial Driver's License (CDL) | <input type="checkbox"/> Past Employment |
| <input type="checkbox"/> State Criminal for State of _____ | <input type="checkbox"/> Criminal – County of _____ |
| <input type="checkbox"/> Education (attached application) | <input type="checkbox"/> Licensure (attach application) |
| <input type="checkbox"/> State Abuse Registry | <input type="checkbox"/> Sex Offender Registry |

BEECH TREE MANOR
 EMPLOYMENT REFERENCE
 AUTHORIZATION FORM

RE: _____

POSITION: _____

SOC. SEC# _____

DATE OF EMPLOYMENT _____

The above applicant as referenced above has given your name to us. We would appreciate your response to the questions below by giving your frank opinion to the questions used. For additional information please use the reverse side of this sheet.

We regard any information given to us entirely confidential. Any information you would share, but not in writing please call me at 423-784-6626 ext#203.

Sincerely,

Melissa Daugherty
 Business Office Associate

I, THE UNDERSIGNED, AUTHORIZE YOU TO RELEASE ANY INFORMATION PERTAINING TO MY WORK, SKILLS, EXPERIENCE OR RECORDS, ETC., TO BEECH TREE MANOR

 Applicant's Signature

Has the applicant ever been employed by your company? _____

If so, in what capacity? _____

Dates of employment _____ to _____

Is applicant eligible for rehire? _____ If no, Why? _____

Person giving reference: _____ Title _____ Today's Date _____

	Excellent	Good	Average	Fair	Poor
Character					
Quality of work					
Dependability					
Attendance					
Loyalty					
Neatness					
Initiative					
Alertness					
Cooperation with Administration					
Cooperation with Co-Workers					
Leadership					

Completed by: _____ Title/Position: _____ Date _____

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 AUTHORIZATION FORM

RE: _____

POSITION: _____

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Dates of employment _____ to _____

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	Excellent	Good	Average	Fair	Poor
Character					
Quality of work					
Dependability					
Attendance					
Loyalty					
Neatness					
Initiative					
Alertness					
Cooperation with Administration					
Cooperation with Co-Workers					
Leadership					

Completed by: _____ Title/Position: _____ Date _____

Release Authorization

I hereby authorize a search of records for convictions or pleas of guilt for crimes prescribed and defined by Tennessee Code Annotated, which they may have regarding me. This information shall be released to and used for consideration in determining if I qualify for employment or volunteer work in the:

BEECH TREE MANOR
240 HOSPITAL LANE
JELICO, TN 37762

I voluntarily release each of its officers, agents, and employees, from any and all liability or damages resulting from the release of any and all information.

Signature

Date

Witness

Date

Employment/Volunteer Information

Name _____

Last

First

Middle

Maiden

Present address: _____

Sex _____

Race _____

DOB _____

Driver's License Number _____

Social Security Number _____

_____ No felony convictions or outstanding warrants exist.

_____ RECORD OF FELONY CONVICTIONS/OUTSTANDING WARRANTS.

Law Enforcement Official

Title

Date

BEECH TREE MANOR
PRE-EMPLOYMENT DRUG TEST

I, _____ give Beech Tree Manor permission to process pre-employment drug screen. This drug screen is in no way represents a promise of a job for me with Beech Tree Manor. However, if I do not have a clean drug test, I realize I will not be qualified for a job at Beech Tree Manor.

Date: _____

Signature: _____

Witness: _____

PRE-EMPLOYMENT REFERENCE CHECK

Applicant Name: _____

Supervisor or person calling for references: _____

REFERENCES CALLED

1. Name _____ Relationship _____

Comments:

2. Name _____ Relationship _____

Comments:

3. Name _____ Relationship _____

Comments:

CURRENT AND/OR FORMER EMPLOYERS

4. Name _____ Company _____

Comments:

Date of Employments:

Job Duties

5. Name _____ Company _____

Comments:

Date of Employments:

Job Duties

NOTES FROM PERSONAL INTERVIEW: _____

*****Please include current employer if employee indicated on Application for Employment that current employer could be contacted.