



Buffalo Lake Healthcare Center, Inc.

Westview Estates - Buffalo Lake Area Housing - Westview Apartments
703 West Yellowstone Trail, P.O. Box 368, Buffalo Lake, MN 55314

JOB APPLICATION

An Equal Opportunity Employer

All applicants are considered without regard to race, color, gender, religion, national origin, age, marital or veteran status, mental or physical disability unrelated to job performance or any other legally protected status. Those applicants requiring reasonable accommodation to the application and/or interview process should notify our Human Resources Department.

POSITION APPLYING FOR: _____ DATE: _____

PERSONAL INFORMATION

Legal name: First _____ Last _____ Middle Initial _____

Address: Street _____ City _____ State _____ Zip code _____

Home Telephone: _____ Other Telephone: _____

E-mail: _____ Social Security #: _____

How did you hear about this position? _____

Are you legally eligible for employment in the United States? Yes No

United States Visa status, if applicable: _____

Are you at least 18 years old? Yes No Can you furnish a work permit? Yes No

If no, please explain: _____

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

POSITION INFORMATION:

Employment status desired: Full Time Part Time Temporary Wage desired: _____

What hours are you available to work? _____

If hired, when could you start? _____

Are you able to perform the essential functions of the job for which you are applying? Yes No

EMPLOYMENT HISTORY (Most recent first)

1. Job Title:		Duties:	
Employer:			
Dates of Employment (month / year)			
From:	To:		
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	
Employers Address:			
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			

2. Job Title:		Duties:	
Employer:			
Dates of Employment (month / year)			
From:	To:		
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	
Employers Address:			
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			

3. Job Title:		Duties:	
Employer:			
Dates of Employment (month / year)			
From:	To:		
Starting Salary:	Ending Salary:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	
Employers Address:			
Supervisor:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone:	
Reason for Leaving:			

EDUCATION				
Type of school	Name and Location	Degree Received	Subjects Studied	Did you graduate?
High School				
College 1 University				
Graduate School				
Tech School				
Other				

Special courses, training or experience acquired, including military experience:

SKILLS
Please describe any other experience, abilities or skills that might be helpful and would benefit you working for our Facility:

REFERENCES (LIST THREE SCHOOL OR PERSONAL REFERENCES - NOT RELATIVES)		
NAME	How you know them (friend / work)	Area Code & Phone Number
		()
		()
		()

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or omissions of facts in this application are grounds for disqualification from further consideration or for dismissal from employment.

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 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 truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not lawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. 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 administrator.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

Notice to Applicants & Employees: Screening tests for illegal drug use may be required before hiring and during your employment with our facility.

If employed, I agree to conform to the rules, regulations and policies of the company. I hereby acknowledge that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant

Date

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**AUTHORIZATION FOR RELEASE
OF
EMPLOYMENT INFORMATION**

**“I hereby authorize and release my former employer,
_____, to provide any and all information
regarding my employment history. This includes: dates
of employment, position held, job performance, attendance, and
all other data required by the Buffalo Lake Healthcare Center. I
release the Buffalo Lake Healthcare Center and my former
employer who is supplying the information from any and all
liability that may result from furnishing such information
regarding my previous employment.”**

Print Name: _____

Signature of Applicant: _____

Date: _____

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APPLICANT SURVEY FORM

Last Name

First Name

Middle Initial(s)

Date

Position (s) for which you are applying

Please read carefully:

As an affirmative action employer, we must monitor our equal employment opportunity and affirmative action program, and report the results to government agencies. Please help us gather this information by identifying your sex, race or ethnicity, and disability status on this form.

Providing this information is **completely voluntary**. If you choose not to provide some or all of this information, you will not be subject to any negative or adverse treatment.

The information you provide will be used **only** to monitor our compliance with equal opportunity laws and regulations, and **for no other purpose**.^{*} When we receive this form, we will immediately place it in a confidential file separate from your application. If you wish, you may mail this form to us in an envelope separate from the one that contains your application.

Race/Ethnicity – Select one or more

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Disability – Are you a person with a disability ?

Yes

No

Sex – Select one

Female

Male

*** This form is not used for employment decisions.** If you have a disability and need an accommodation so that you can perform the duties of the job for which you are applying, please notify us in some other manner.