

BUTTE HOME HEALTH AND HOSPICE APPLICATION FOR EMPLOYMENT

BUTTE HOME HEALTH & HOSPICE does not and shall not discriminate on the basis of race, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, veteran status or military status in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, selection of volunteers and vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all members of our staff, patients, volunteers and subcontractors and vendors.

BUTTE HOME HEALTH & HOSPICE is an equal opportunity employer. We will not discriminate and will take affirmative action measures to ensure against discrimination in employment, recruitment, advertisements for employment, compensation, termination, upgrading, promotions and other conditions of employment against any employee or job applicant on the basis of race, color, gender, national origin, age, religion, creed, disability, veteran status, military status, sexual identity or gender expression.

(Please Print)

Date of Application: _____

Position(s) Applied For: _____

Referral Source: Advertisement Friend Relative Walk-in
 Employment Agency Internet Other: _____

Name: _____
Last First Middle

Address _____
Number Street City State Zip Code

Telephone (_____) _____ Cell Phone (_____) _____
Area Code Area Code

Additional Message Phone (_____) _____ E mail: _____
Area Code

Nursing License # _____ HHA Certificate # _____ Other # _____

Have you filed an application here before? Yes No If Yes, give date _____

Have you ever been employed here before? Yes No If Yes, give date _____

Are you employed now? Yes No May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed
in the United States because of Visa or Immigration status? Yes No

On what date would you be available for work? _____

Do you have reliable transportation? Yes No

Are you available to work Full time Part-time Temporary

Days available to work Sa Su M Tu W Th F Hours available to work _____

Are you available to rotate weekends? Yes No

Do you have any limitations on availability?

(i.e.: Mon/Wed can work 10:00 am—2:00 PM; Tues/Thurs can work 6:00 a.m.—10:00 PM.)

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities.

Exclude organization names which indicate race, color, religion, sex or national origin.

COMPLETE ALL AREAS ASKED FOR:

1.	Employer	Telephone	Dates Employed From To		Work Performed
	Address				
	Job Title				
	Supervisor				
	Reason for leaving				
2.	Employer	Telephone	Dates Employed From To		Work Performed
	Address				
	Job Title				
	Supervisor				
	Reason for leaving				
3.	Employer	Telephone	Dates Employed From To		Work Performed
	Address				
	Job Title				
	Supervisor				
	Reason for leaving				
4.	Employer	Telephone	Dates Employed From To		Work Performed
	Address				
	Job Title				
	Supervisor				
	Reason for leaving				

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience.

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____

2. _____

3. _____

EDUCATION

	High School	College/University	Graduate/Professional	Comments
School Name				
Years Completed (Circle)	9 10 11 12	1 2 3 4	1 2 3 4	
Diploma/Degree				
Describe Course of Study:				
Describe Specialized Training, and Apprenticeship, Skills and Honors Received:				

In Case of Emergency Notify:

Name

Address Phone number

EMPLOYER’S STATEMENT

Employees are hired “at will” at Butte Home Health and Hospice and employee or employer may cause a separation of employment with or without cause, and with or without notice.

APPLICANT’S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment.

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 and regulations of the Agency.

If I am employed by the Agency, I will conform to the rules and regulations of this Agency and understand that my employment can be terminated, at any time, with or without cause, and with or without notice, by either myself or the Agency. I understand that no Supervisor or representative of this Agency other than the Administrator has authority to enter into any agreement contrary to the foregoing or for employment for any specified period of time.

“I understand that the processing of my employment application requires the expenditure of time and resources by this employer. I also understand that this employer would not process this application if I had no genuine interest in employment with this employer at the time this application is submitted”.

“I understand the necessity of any written tests and face to face interviews are a part of the selection process for any position. I understand the necessity and give my consent to Butte Home Health and Hospice to thoroughly screen my application for a criminal background check, sex-related offenses, adult abuse or child abuse offences, violations through the Office of Inspector General’s Office, drug testing per Agency policy, physical for client contact positions, prior work references, other references on the application, driver’s license, driving record and education. I understand that the screening process will only begin when I am considered for employment and completed after offer of employment contingent upon the outcome of the screening process. I also understand that Butte Home Health is a drug free workplace and I consent to being tested for drugs.”

“Therefore, I hereby represent and certify that I am genuinely and sincerely interested in employment with this employer and that my application is submitted in good faith and without false pretenses in furtherance of my sincere and genuine interest in employment with this employer.”

Signature of Applicant

Date

AN EQUAL OPPORTUNITY EMPLOYER M/F/H/V