



Application for Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

Name: _____ Social Security # _____
Last First Middle - -

Address: _____
Street City ST Zip Code

Telephone# () _____ Cell Phone # () _____ E-Mail Address _____

Position(s) applied for _____ Date of Application ____/____/____

REFERRAL SOURCE (Please check the appropriate category and name the source)

- Walk-in _____
- School _____
- Employee _____
- Job Fair _____
- Advertisement _____
- Staffing Agency _____
- Company Website _____
- Gov't Employment Agency _____
- Internet _____
- Other _____

If necessary, best time to call you at home is _____ a.m/pm
May we contact you at work? yes no
If yes, work number and best time to call:
() _____ a.m/pm

If you are under 18 and it is required,
Can you furnish a work permit? yes no
If **no**, please explain: _____

Have you submitted an application here before? yes no
If **yes**, give date(s) and position(s): _____

Have you ever been employed here before? yes no
If **yes**, give dates: From ____/____/____ To ____/____/____

Are you legally eligible for employment in this country? yes no

Date available for work: ____/____/____

What is your desired salary or hourly rate of pay?
\$ _____ per _____

Type of employment desired: Full-time Part Time
 Educational Co-op Seasonal Temporary

Type of work schedule interested in: (check all that apply)
 Days (1st Shift) Evenings/Nights (2nd Shift) Weekends
 Rotating Shifts Split Shift Overtime

Will you relocate if job requires it? yes no

Will you travel if job requires it? yes no

If they have been explained to you, are you able to meet the attendance requirements of the position? yes no

Will you work overtime if required? yes no
If **no**, please explain: _____

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodations)?
This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.
 yes no Need more information about the Job's "essential functions" to respond

Driver's license number required if driving may be required in the job for which you are applying:
_____ State _____

Have you ever been bonded? yes no

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of a crime? yes no
If **yes**, please provide date(s) and details:

Have you entered into an agreement with any former employer or other party (such as a non-competition agreement) that might, in any way, restrict your ability to work for our company? yes no
If **yes**, please explain:

Employment History

Starting with your most recent employer, provide the following information.

<p>Employer _____ Telephone (____) _____</p> <p>Street Address _____ City _____ State _____</p> <p>Starting job title (for most recent position held) _____</p> <p>Immediate Supervisor (for most recent position held) _____ May we contact for reference? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> later</p> <p>Why did you leave? _____</p> <p>Summarize the type of work performed and job responsibilities. _____</p> <p>What did you like most about the position? _____</p> <p>What were the things you liked least about the position? _____</p>	<p>Dates employed _____ / _____ / _____ to _____ / _____</p> <p>Compensation (Starting)</p> <p><input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per</p> <p>Commission/Bonus/Other \$ _____</p> <p>Compensation (final)</p> <p><input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per</p> <p>Commission/Bonus/Other \$ _____</p>
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Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

If not addressed on previous page, have you ever been fired or asked to resign from a job? yes no

If yes, please explain

Skills and Qualifications

Please use the space below for any additional information necessary to describe your full qualifications (i.e. specialty areas such as ICU, OB/GYN, special equipment, typing speed, computer software programs).

Do you speak, read or write in any language other than English?

If yes, please describe

Education and Training

Name of school and address	No. of Years	Course/Major	Diploma/Degree
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1.) _____	_____	_____	_____
2.) _____	_____	_____	_____

Professionals and Technical Applicants Only

Professional License No.	Type of License	Place of issue	Expiration Date
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			/ /
			/ /

Membership in professional organizations; If you are license, has your license ever been suspended or revoked or are you currently involved in any proceeding that could affect your license or certification? yes no

If yes, please give date, location and disposition of your case:

References

List the name and telephone number of three business/work references who are *not* related to you and are not previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship	Telephone	Yrs Known
			()	
			()	
			()	

Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any similar protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

In your current or prior job, have you ever written instructions or directions to be followed by employees or customers?

yes no not applicable

If yes, please explain: _____

Is there any other job-related information you want us to know about you?

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representative, 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 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 unlawfully 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.

I understand that this application remains current for only 30 days. 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 for me to reapply and fill out a new application.

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 president.

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 application 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. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

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 (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

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.

Signature of Applicant _____

Date _____



CLARA BARTON
Hospital
 250 West Ninth
 Hoisington, Kansas 67544

**VOLUNTARY SELF-IDENTIFICATION
 (CONFIDENTIAL-FOR STATISTICAL USE ONLY)**

We are an equal opportunity employer and do not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, sexual orientation or any other classification protected by federal, state or local law. The information below will be used only in the compilation of data for affirmative action reporting.

Completion of this data is voluntary and will not affect your opportunity for employment or terms or conditions of employment, if hired. Identification can be declared at any time prior to or, if applicable, after hire. Please return this page with your application.

PLEASE COMPLETE IN FULL:

Date: _____ Position applied for: _____
 Name: _____ Social Security # _____ Sex: (Circle appropriate response) Male Female
 Date of birth: _____ Applicant's zip code: _____

RACE/ETHNICITY:

(Please check one of the descriptions below corresponding to the ethnic group with which you most identify.)

- _____ **Hispanic or Latino**--A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- _____ **White (Not Hispanic or Latino)**--A person having origins in an of the original peoples of Europe, the Middle East, or North Africa.
- _____ **Black or African American (Not Hispanic or Latino)** -- A person having origins in any of the black racial groups of Africa.
- _____ **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)**--A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- _____ **Asian(Not Hispanic or Latino)**--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.
- _____ **American Indian or Alaska Native (Not Hispanic or Latino)**--A person having origins in any of the original peoples of North and South American (including Central America), and who maintain tribal affiliation or community attachment.
- _____ **Two or More Races (Not Hispanic or Latino)**--All persons who identify with more than one of the above five races.
- _____ **Race missing or unknown**--Applies to **Applicants only**, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

VETERAN STATUS: (Please check one if it describes your veteran status.*)

- _____ **SPECIAL DISABLED VETERAN:** Means (A) a veteran who is entitled to compensation (or who, but for the receipt of military retired pay, would be entitled to compensation) under laws administered by the Department of Veteran Affairs for a disability rated at 10 or 20 percent in the case of a veteran who has been determined to have a serious employment disability or (B) a person who was discharged or released from active duty because of a service-connected disability.
- _____ **VIETNAM ERA VETERAN:** A Vietnam Era veteran is a person who (1) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964, and May 7, 1975, and was discharged or released with other than a dishonorable discharge; (2) was discharged or released from active duty for a service connected disability if any part of such active duty was performed between August 5, 1964, and May 7, 1975; or (3) served on active duty for more than 180 days and served in the Republic of Vietnam between February 28, 1961, and May 7, 1975.