

902 Berkshire Rd

Smithfield, NC 27577

Phone: 919-934-3471

Fax: 919-934-5960

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

Position Applied for: Click here to enter text. Date of Application: Click here to enter a date.

Name: Click here to enter text. Applicant ID #: Click here to enter text.

Address: Click here to enter text.

Telephone: Click here to enter text.

Telephone 2: Click here to enter text.

Referral Source (how you heard about us): Click here to enter text.

If you are under the age of 18, can you furnish a work permit? Click here to enter text.

If no, please explain: Click here to enter text.

Have you ever been employed here before? Click here to enter text.

If “yes”, please give dates and positions: Click here to enter text.

Are you legally eligible for employment in this country? Click here to enter text.

Dates Available for work: Click here to enter text.

What is your desired Salary Range? Click here to enter text.

Type of Employment Desired: [ ] Full time [ ] Part Time [ ] Temporary Seasonal [ ] Educational Co-Op

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodation [ ] yes [ ] no [ ] need more information about the job’s essential functions to respond.

*(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)*

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

License number: Click here to enter text. State: Click here to enter text.

*Answering “yes” to either part of 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: Click here to enter text.

Emergency Contact: Click here to enter text.

**Employment History:**

*Starting with your most recent employer, provide the following information:*

Employer 1: Click here to enter text.

Telephone: Click here to enter text.

Street Address: Click here to enter text.

Starting job title/final job title: Click here to enter text.

Immediate supervisor and title for most recent position held: Click here to enter text.

May we contact for reference: [ ] yes [ ] no [ ] later

Why did you leave? Click here to enter text.

Summarize the type of work performed and job responsibilities: Click here to enter text.

Dates Employed: Click here to enter text.

[ ] Hourly [ ] Salary

Starting Compensation: Click here to enter text.

Other compensation/bonus/commission:Click here to enter text.

Ending Compensation: Click here to enter text.

Employer 2: Click here to enter text.

Telephone: Click here to enter text.

Street Address: Click here to enter text.

Starting job title/final job title: Click here to enter text.

Immediate supervisor and title for most recent position held: Click here to enter text.

May we contact for reference: [ ] yes [ ] no [ ] later

Why did you leave? Click here to enter text.

Summarize the type of work performed and job responsibilities: Click here to enter text.

Dates Employed: Click here to enter text.

[ ] Hourly [ ] Salary

Starting Compensation: Click here to enter text.

Other compensation/bonus/commission:Click here to enter text.

Ending Compensation: Click here to enter text.

Employer 3: Click here to enter text.

Telephone: Click here to enter text.

Street Address: Click here to enter text.

Starting job title/final job title: Click here to enter text.

Immediate supervisor and title for most recent position held: Click here to enter text.

May we contact for reference: [ ] yes [ ] no [ ] later

Why did you leave? Click here to enter text.

Summarize the type of work performed and job responsibilities: Click here to enter text.

Dates Employed: Click here to enter text.

[ ] Hourly [ ] Salary

Starting Compensation: Click here to enter text.

Other compensation/bonus/commission:Click here to enter text.

Ending Compensation: Click here to enter text.

**Skills and Qualifications:**

Summarize any special training, skills, licenses, and/or certificates that may assist you in performing the position you are applying for: Click here to enter text.

Computer skills (check appropriate boxes. Include software titles and years of experience.)

Word Processing: Click here to enter text. Years: Click here to enter text.

Spreadsheet: Click here to enter text. Years: Click here to enter text.

Presentation: Click here to enter text. Years: Click here to enter text.

Email: Click here to enter text.

Internet: Click here to enter text.

Other: Click here to enter text.

**Educational Background** *(starting with your most recent school attended, provide the following information:*

School (include city and state): Click here to enter text.

Years completed: Click here to enter text.

Completed: [ ] Diploma GED [ ] Degree: Click here to enter text. [ ] Certification: Click here to enter text. [ ] Other: Click here to enter text.

GPA/class rank: Click here to enter text.

Major/Minor: Click here to enter text.

School (include city and state): Click here to enter text.

Years completed: Click here to enter text.

Completed: [ ] Diploma GED [ ] Degree: Click here to enter text. [ ] Certification: Click here to enter text. [ ] Other: Click here to enter text.

GPA/class rank: Click here to enter text.

Major/Minor: Click here to enter text.

School (include city and state): Click here to enter text.

Years completed: Click here to enter text.

Completed: [ ] Diploma GED [ ] Degree: Click here to enter text. [ ] Certification: Click here to enter text. [ ] Other: Click here to enter text.

GPA/class rank: Click here to enter text.

Major/Minor: Click here to enter text.

**References**

*(List names, and telephone numbers 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: Click here to enter text.

Title: Click here to enter text.

Relationship to You: Click here to enter text.

Telephone: Click here to enter text.

Email: Click here to enter text.

Number of Years Known: Click here to enter text.

Name: Click here to enter text.

Title: Click here to enter text.

Relationship to You: Click here to enter text.

Telephone: Click here to enter text.

Email: Click here to enter text.

Number of Years Known: Click here to enter text.

Name: Click here to enter text.

Title: Click here to enter text.

Relationship to You: Click here to enter text.

Telephone: Click here to enter text.

Email: Click here to enter text.

Number of Years Known: Click here to enter text.

Social Security Number SS#: Click here to enter text. *(We will use this information only for employment purposes and make reasonable efforts to safeguard your privacy)*

**Application 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 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 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, expect 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 assurance to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are written and signed by the employer’s president.

I also understand that if I am hired, I will be required to provide proof if identity and legal authorization to work in the United States and that the 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. Smithfield Manor, Inc. likewise does not tolerate harassment based on sex, race, religion, national origin, citizenship, age, disability, or any other protected status. Smithfield Manor, Inc. 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, (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\_\_\_/\_\_\_/\_\_\_

SMITHFIELD MANOR, INC.

All employment offers for unlicensed positions will be conditional in nature, pending the results of the applicant’s CBC. The facility, in its sole discretion, will decide whether to convert employment from conditional to regular status after reviewing the contents of the CBC. All employment with this facility (whether conditional or regular) is “At-Will” which means that both the employer and employee may terminate the employment relationship at any time, for any reason with or without notice.

Providing false information on this application; specifically including but not limited to, information related to the applicant’s criminal record, will result in immediate discharge from employment. A prior criminal record will not necessarily disqualify you from employment. Answer each question on this application form in a full and truthful manner. By signing your name below you affirm that your answers on this application are true, correct, and complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature Date

I, Click here to enter text., have applied for a position with Smithfield Manor, Inc. and hereby authorize you to issue any information you may have regarding my services and character and do herby unconditionally release you from all liability for any damage whatsoever that may result from furnishing this information.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature Date

**Smithfield Manor, Inc.**

PLEASE READ THE FOLLOWING AND SUPPLY REQUESTIED INFORATION

1. Senate Bill 1192 added a penalty for furnishing false information on an application for employment in a nursing home, home health agency or adult care facility. The Attorney General’s office recommends that facilities include a statement on their application forms indicating this penalty which is provided below:

Any applicant for employment who willfully furnishes supplies or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor. [NCGS131E-265(e)]

1. The attorney General’s office also states that facilities would be prudent to include additional space on their application forms for potential employees to indicate previous addresses. This will help facilities determine the five year residency status of the applicant. Lynda McDaniel, Director of the Division of Facility Services, suggests that facilities accept the information provided by the applicant as truth. If the information provided by the applicant is compete and there are no glaring contradictions, facilities may rely on the applicant’s reported residence history.
2. SB 1992 added a statutory conditional employment clause that allows facilities to hire new employees pending the outcome of the background check provided that the facility does not hire an individual prior to obtaining consent for the check completed fingerprint cards and that the request is submitted within five (5) das of the conditional employment date.

Please Provide Addresses below for the past five (5) years:

1. Name: Click here to enter text.

Street: Click here to enter text.

City/State: Click here to enter text.

Zip: Click here to enter text.

1. Name: Click here to enter text.

Street: Click here to enter text.

City/State: Click here to enter text.

Zip: Click here to enter text.

1. Name: Click here to enter text.

Street: Click here to enter text.

City/State: Click here to enter text.

Zip: Click here to enter text.