

**EVERGREEN COMMONS**  
 1070 Luther Road  
 East Greenbush, New York 12061  
 (518) 479-4662



**EMPLOYMENT APPLICATION**

Federal and State law prohibits discrimination in employment because of age, race, creed, color, national origin, sexual orientation, military status, sex, disability or marital status.

DATE: \_\_\_\_\_ POSITION APPLIED FOR: \_\_\_\_\_ HRS AVAILABLE FT \_\_\_\_\_ PT \_\_\_\_\_

NAME: \_\_\_\_\_ SOC. SEC. NO. \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE # \_\_\_\_\_

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN WHO HAS THE LEGAL RIGHT TO REMAIN AND WORK IN THE U.S.? (YOU WILL BE REQUIRED TO FURNISH PROOF OF LAWFUL WORK STATUS IF YOU ARE EXTENDED A JOB OFFER.) YES \_\_\_ NO \_\_\_

UNDER 18 YEARS OF AGE? Yes \_\_\_ No \_\_\_ DO YOU HAVE A WORK PERMIT? YES \_\_\_ NO \_\_\_

HAVE YOU WORKED FOR EVERGREEN COMMONS/EDEN PARK BEFORE? YES \_\_\_ NO \_\_\_  
 IF YES, WHERE AND WHEN? \_\_\_\_\_

HOW DID YOU HEAR ABOUT EVERGREEN COMMONS? \_\_\_\_\_

CAN YOU PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION FOR WHICH YOU ARE APPLYING? \_\_\_ YES \_\_\_ NO  
 IF NO, PLEASE EXPLAIN: \_\_\_\_\_

**EDUCATION** (Circle Highest Grade Completed) 1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4

Name and Location	# Of Yrs. Attended	Did You Graduate?	MAJOR SUBJECT
High School _____			
Nursing School _____			
College _____			

**WORK EXPERIENCE** (Please list last position first-**PLEASE GIVE COMPLETE ADDRESS AND PHONE NUMBER**)

EMPLOYER	SALARY	PERIOD OF EMPLOYMENT From - To	JOB TITLE	REASON FOR LEAVING
NAME: _____ ADDRESS: _____ PHONE: _____ SUPERVISOR NAME: _____				
NAME: _____ ADDRESS: _____ PHONE: _____ SUPERVISOR NAME: _____				
NAME: _____ ADDRESS: _____ PHONE: _____ SUPERVISOR NAME: _____				

**EXPLAIN ANY GAPS IN EMPLOYMENT:** \_\_\_\_\_  
 \_\_\_\_\_

**LICENSED PERSONNEL:**

STATE REGISTRATION NUMBER: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

IF NO LICENSE, PERMIT NUMBER: \_\_\_\_\_

IS YOUR PROFESSIONAL LICENSE, OR WAS IT EVER, UNDER PROBATION OR RESTRICTIONS OR ANY OTHER LIMITATIONS? Yes \_\_\_\_\_ No \_\_\_\_\_

**REFERENCES:**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

Have you ever been convicted of any crime or other offense other than a traffic violation? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please describe fully the criminal conviction(s), listing the nature of the offense, your age at the time of the offense, and your rehabilitation since the conviction(s). A conviction will not necessarily be a bar to employment. \_\_\_\_\_

I understand that any employment will be on a six (6) month introductory basis and that my employment may be terminated with or without cause or notice, at any time, at either my option or that of the Company. I understand that no management representative has any authority to enter into any agreement for continuing employment for any specific period of time or which is contrary to the foregoing without written approval of the Company. I give the Company permission to contact all or any of my previous employers, references and any investigative agency including credit or criminal background check and authorize them to provide all information requested of them by the Company. I release all parties giving or receiving information from any liability associated with doing so. After a tentative offer of employment has been made, if requested by the Company, I agree to take a job-related medical examination at no personal expense and authorize the examining physician to disclose the findings to the Company. I understand that any offer of employment is conditioned upon receipt of satisfactory references and satisfactory completion of such job-related medical examination.

I have provided truthful and complete responses to all inquiries in the application and understand that the discovery of any falsification or omission constitutes a ground for immediate dismissal. If employed, I will abide by the Company's rules and regulations, which I understand are subject to change by the Company.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PLEASE PRINT NAME

**DO NOT WRITE BELOW**

POSITION: \_\_\_\_\_ FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ BASIC HOURS \_\_\_\_\_ SHIFT \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ STARTING DATE \_\_\_\_\_ STARTING RATE \_\_\_\_\_

INTERVIEWED BY \_\_\_\_\_ STUDENT YES \_\_\_\_\_ NO \_\_\_\_\_

HIRED BY \_\_\_\_\_

NAME OF FACILITY \_\_\_\_\_