EMPLOYMENT APPLICATION ST. JOSEPH VILLA 464 ST. BERNARDINE STREET READING, PA 19607 610-777-5556 (P) 610-777-5545 (F) EMAIL: administrator@saintjosephvilla.com

This application will be considered active for the position applied for six months after receipt. Thereafter, you must reapply if you continue to be interested in employment. St. Joseph Villa provides equal employment opportunities without regard to race, color, sex, religion, national origin, age, non-disability, veteran status.

Please read carefully; answer all questions; print clearly in ink. If any additional space is required, attach additional paper. Management and professional applicants must attach a resume.

Name:	Today	Today's date:		
Address:				
Phone:	Socia			
Position Applied for:	Salary			
Are you legally able to work in the Un	ited States:yes	no Are you over the age 18:		
Have you applied here before:	Date you are a	available to begin employment:		
Type of employment desired: Full-t Flexit	ime Part-time ble Temporary			
Days available: Monday Friday	Tuesday Saturday	Wednesday Thursday Sunday		
Are you willing to work alternate weel	kend:	Willing to work over-time:		
Time Periods willing to work: Day S Secon Third <i>Education</i> :	d Shift (3 p.m. – 11:00 p.m.)			
High School:				
Did you graduate:		ee/Course of study:		
College/University:				
Did you graduate:	Degree	Degree/Course of study:		
Other:				
Did you graduate:				
Have you ever been convicted of a crim	ne:			
If yes, please describe in detail:				

Previous Employment: (begin with the most recent position)

Employer:		
Address:		
Phone:	Supervisor:	
Nature of Business:	Date employed:	
Position(s) held:	Wage or salary:	
Description of job and duties:		
Reason of leaving:		
Employer:		
Address:		
Phone:	Supervisor:	
Nature of Business:	Date employed:	
Position(s) held:	Wage or salary:	
Description of job and duties:		
Reason of leaving:		
Employer:		
Phone:	Supervisor:	
Nature of Business:	Date employed:	
Position(s) held:	Wage or salary:	
Description of job and duties:		
Reason of leaving:		
<i>References</i> Please furnish the names and addresses of two people employed.	to whom you are not related and by whom you have not been	
Name:		
Address:		

Name:_____

Address:		Phone:				
Who referred you to us (person/agency/employee/:						
Summarize your special	skills or qualifications:					
Military:	Branch of service:	Rank of discharge:				
Date of service	Duties/training/	schools:				

I certify that the information contained in this application is true and correct to the best of my knowledge, and I understand that false of incorrect information in this application is grounds for disqualification from further consideration or for deny employment. Further, I hereby authorize my former employer(s), reference(s), and any other individual or organization to provide information solicited by the company and I hereby release and discharge each of the above including the company, from any liability of any kind or nature.

I understand that any offer of employment with the employer is contingent upon my passing any required physical examinations. I also understand that if the applicant is hired, either party has the right to end the employment relatively at any time.

This employer is an Equal Opportunity Employer and will not base hiring decisions on race, color, religion, sex, age, national origin, disability, or veteran status.

All application will remain on file for six months.

Signature of Applicant

Date

Background Authorization Form of St. Joseph Villa

Print clearly and use ink pen on this j	form.		
TO BE COMPLETED BY APPLICA	NT IN FULL		
Last Name:	First Name:	M	iddle Name:
Maiden Name or Alias used in the pas	t five (5) years:		
Social Security Number:	Date of Birth:*		
	criminal record check. Many jurisdictions to the discrimination in Employment Act of 1967 years of age and older.		
Current Address:			
Street:	City:	State:	Zip:
County:	Dates lived here:	to	
List below information for the last two	(2) years. Do not list current address.		
Address:	Dates li	ved here:	to
Address:		ved here:	to
FELONY, OR PLED NOLO CONT OF JUDGMENT IN <i>THE PAST TEL</i>	CTED, OR ARE YOU AWAITING PR ENDERE (NO CONTEST) TO A MIS N <i>YEARS</i> ? YES:	DEMEANOR OR A NO:	FELONY REGARDLESS
Charges occurred in: City:	County: G CAREFULLY BEFORE SIGNING T		

I understand that as part of your procedure for processing my application, an investigative report about my background may be made which may include information obtained through personal interviews regarding my character, general reputation, and personal characteristic or mode living. I have the right to make a written request, within a reasonable period of time, for complete disclosure of additional information concerning the nature and scope of the investigation. I authorize investigation of all statements contained in this authorization form. ALL representations by me in this data sheet are to the best of my knowledge and belief true and correct, and I have not knowingly omitted any related information of an adverse nature. Inaccurate information may make me ineligible for employment. I also understand that having a criminal conviction is not an automatic bar for employment. In the absence of a written contract of employment, employment with St. Joseph Villa is employment at the will of each party. The employment relationship may be terminated at any time at the discretion of the employee or St. Joseph Villa.

SIGNATURE: