

Please clearly print and complete all items:

Part 1 :: Personal Information

Employee Full Name: _____
(As listed on the employee's Social Security Card)

Phone Number: () -

Referred By: _____

Current Address: _____ State: _____ Zip: _____

City: _____ Email Address: _____

Are you a US citizen or do you have the legal right to be employed in the US? Yes No Are you at least 18 years of age? Yes No

Have you ever been convicted of a felony or had a DUI? Yes No

A conviction will not prevent you from being considered for employment.

If yes, please complete the following:

Charge: _____ Date: _____

Location: _____ Result/Outcome: _____

Part 2 :: Employment Information

Position applying for: _____ Date you can start: _____ Desired Pay : \$ _____

Are you presently employed? Yes No If yes, may we inquire of your present employer? Yes No

Have you ever applied at the Ashford before? Yes No How did you hear about Ashford? _____

I understand that as a C.N.A. or Kitchen Staff Member, I am required to work every other weekend (Sat/Sun). Yes No

Number of hours/week I desire to work: _____ Shifts I desire and am available to work: AM (7-3), PM (3-11), NOC (11-7)
(Please circle all that apply - For CNAs only)

Part 3 :: Education

	School Name / Location	Years Attended	Degree Earned	Major Field of Study
High School				
College				

Part 4 :: Prior Employment Experience

Company Name: _____ Phone Number: () -

Address: _____ State: _____ Zip: _____

Date Started: _____ Date Ended: _____ Salary: \$ _____ Supervisor Name: _____

Company Name: _____ Phone Number: () -

Address: _____ State: _____ Zip: _____

Date Started: _____ Date Ended: _____ Salary: \$ _____ Supervisor Name: _____



Employee Application

Part 5 :: Personal References

Full Name: _____ **Phone Number:** () - _____

Address: _____ **Email:** _____

Company Name: _____ **Years Known:** _____

Full Name: _____ **Phone Number:** () - _____

Address: _____ **Email:** _____

Company Name: _____ **Years Known:** _____

Part 6 :: EEO Statement

Ashford is an equal opportunity employer and will consider your application regardless of race, color, religion, sex, national origin, age, marital or veteran status; medical condition or disability; or any other legally protected status. This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered completely and accurately. No action will be taken on this application until all questions have been answered and the application has been signed and dated.

Part 7 :: Authorization to Release Information

I understand that no employment offer is being made by Ashford at this time. I certify that the information on this application is true and correct without any consequential omission of any kind whatsoever. I understand that if I am employed, any false, misleading, or otherwise incorrect statements made on this application form or during any interview may be grounds for my immediate discharge.

I hereby authorize Ashford to contact any company, institution, or individual it deems appropriate to investigate my employment history, character, and qualifications. I authorize any third party to release to Ashford of Springville, Inc. any and all information and documentation it requests. This information may include, but is not limited to, dates of employment, positions held, responsibilities, base compensation and bonus or commissions (if applicable), job performance, education, degrees received, dates of attendance, criminal history information, etc.

A copy of this authorization may be accepted as an original. In addition, I hereby waive my right to bring any cause of action against these parties for defamation, invasion of privacy, or any other reason because of their statements.

I agree that, if I am employed, I will abide by all the rules and regulations of Ashford. I further understand that no one at Ashford is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the Owner of the company. I also understand that if I am hired, my employment will be at will and may be terminated by myself or by Ashford at any time for any reason or no reason, with or without prior notice.

Signature of Employee

Date

Please remember to attach any other information (such as your resume) to this form if it applies.