

# HEALTH SYSTEMS 2000, INC

1901 Oak Park Blvd, Lake Charles, LA 70601 (337)562-1140 (337)562-1142

## Application For Employment

Federal and State laws prohibit discrimination in employment because of sex, race, color, religion, national origin, age, disability, veteran status, and citizenship status. We are an equal opportunity employer. Applicants may request accommodations needed to apply for work. Equal access to programs, services and employment is available to all persons. Those applications requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resource Department.

Position (s) applied for \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Last First Middle

Address: \_\_\_\_\_  
 Street City State Zip Code

Telephone # ( ) \_\_\_\_\_ Referral Source (How did you hear about us?) \_\_\_\_\_

Is there any additional information regarding your name (i.e. aliases, nicknames) necessary in order for our agency to check references or prior employers? \_\_\_ Yes \_\_\_ No

If you are under 18, and it is required, can you furnish a work permit?..... \_\_\_ Yes \_\_\_ No

If **no**, please explain \_\_\_\_\_

Have you ever been employed here before? If yes, give dates and positions..... \_\_\_ Yes \_\_\_ No

Are you legally eligible for employment in this country?..... \_\_\_ Yes \_\_\_ No

Date available for work \_\_\_\_ / \_\_\_\_ / \_\_\_\_ What is your desired salary range? .....\$ \_\_\_\_\_

Type of employment desired \_\_\_ Full-Time \_\_\_ Part-Time \_\_\_ As Needed \_\_\_ Educational Co-Op

Do you have responsibilities that would limit your availability to work?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If so, please explain: \_\_\_\_\_

**Are you willing and able to work:**

**Indicate Shift Preference:**

Weekends? \_\_\_ Yes \_\_\_ No

Day \_\_\_\_\_

Holidays? \_\_\_ Yes \_\_\_ No

Evening \_\_\_\_\_

Rotating Shifts? \_\_\_ Yes \_\_\_ No

Night \_\_\_\_\_

Do you possess a valid driver's license? \_\_\_ Yes \_\_\_ No

Do you possess a valid commercial driver's license? \_\_\_ Yes \_\_\_ No

Driver's license number if driving may be required in position for which you are applying?

\_\_\_\_\_ State \_\_\_\_\_

Have you ever been convicted of a crime, other than a minor traffic violation, been on probation, sentenced to jail/prison as a result of a felony conviction or guilty plea, or are you now under pending investigation or charges of violation of criminal law? \_\_\_ Yes \_\_\_ No

Have you ever been fired from a job or resigned to avoid dismissal? \_\_\_ Yes \_\_\_ No

Have you ever been the subject of any adverse action(s) by any duly authorized sanctioning or disciplinary agency for either conduct based or performance based actions? \_\_\_ Yes \_\_\_ No \_\_\_

Explain a "yes" answer to any of the above questions; give the law enforcement authority (city police, sheriff, FBI, etc.), the offense, date of offense, place and disposition of case.

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

*\* Answering "yes" to the above questions 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.*

## EDUCATIONAL BACKGROUND

<i>Attended</i>	<i>Name and Address</i>	<i>How Long?</i>	<i>Graduated</i>	<i>Course or Major</i>
<b>High School</b>				
<b>College</b>				
<b>Technical</b>				
<b>Other</b>				

Summarize any special training, skills, and/or certificates that may assist you in performing the position for which you are applying. \_\_\_\_\_  
 \_\_\_\_\_

Computer Skills (Check appropriate space. Include software titles and years of experience.)

\_\_\_\_\_ Word Processing \_\_\_\_\_ Years: \_\_\_\_\_ E-Mail \_\_\_\_\_ Years: \_\_\_\_\_  
 \_\_\_\_\_ Spreadsheets \_\_\_\_\_ Years: \_\_\_\_\_ Internet \_\_\_\_\_ Years: \_\_\_\_\_  
 \_\_\_\_\_ Presentation \_\_\_\_\_ Years: \_\_\_\_\_ Other \_\_\_\_\_ Years: \_\_\_\_\_

## PROFESSIONAL LICENSES AND/OR CERTIFICATION

<i>Type / Number</i>	<i>Organization or State Issued</i>	<i>Date Issued</i>

Are you currently employed? \_\_\_\_\_ Yes \_\_\_\_\_ No

We routinely contact an applicant's current employer for reference checks. Would this pose particular difficulty for you? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_

***Current or Last Employer***

Employer: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Starting Job Title/Final Job Title: \_\_\_\_\_

Position & Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

***Previous Employer***

Employer: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Starting Job Title/Final Job Title: \_\_\_\_\_

Position & Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

***Previous Employer***

Employer: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Starting Job Title/Final Job Title: \_\_\_\_\_

Position & Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

Please explain all periods of unemployment: \_\_\_\_\_

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

## REFERENCES

List 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.

<i>Name</i>	<i>Address &amp; Phone Number</i>	<i>Occupation</i>	<i>Years known</i>
1.			
2.			
3.			

### APPLICATION INFORMATION STATEMENT (To be read by the applicant before signing)

I certify that all information given on this application is true, correct, and complete. I also certify that I have accounted for all of my work experience and training on this application as well as periods of unemployment.

I authorize this facility to make any investigation of my personal history and financial record through any investigative credit agencies or bureaus of its choice, including an investigative consumer report, it may include information as to my character, general reputation, personal characteristics, and normal living. I authorize this facility to contact any and /or all of my references to disclose full information to this facility regarding my prior employment or my general character, reputation, and mode of transportation and I release any and all prior employers from any liability for releasing that information.

I understand that misrepresentations or omission of facts in this application or in subsequent employment documents completed by me will be cause for cancellation of my consideration for employment or dismissal if I am employed by this facility. I understand that operating conditions may require me to temporarily work shifts other than the one for which I am applying, and adjust to such scheduling changes as directed by my supervisor or the facility administrator. If employed by this facility, I agree to abide by its rules and regulations.

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 FURTHER UNDERSTAND THAT THIS IS ONLY AN APPLICATION FOR EMPLOYMENT AND NOT AN EMPLOYMENT CONTRACT OF ANY TYPE. 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 UNDERSTAND THAT IF I AM EMPLOYED BY THIS FACILITY, MY EMPLOYMENT IS FOR AN INDEFINITE PERIOD OF TIME, IS SUBJECT TO CHANGE IN WAGES, CONDITIONS, BENEFITS, AND OPERATING POLICIES, AND CAN BE TERMINATED AT THE WILL OF EITHER MY EMPLOYER OR ME AT ANY TIME.

PLEASE NOTE THAT PRIOR TO EMPLOYMENT, THIS FACILITY MAY PERFORM A CRIMINAL CONVICTION CHECK ON UNLICENSED PERSONNEL, AND IS PROHIBITED FROM PERMANENTLY EMPLOYING ANY PERSON WHOSE RECORD REVEALS CERTAIN PAST CRIMINAL CONVICTION.

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Signature

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Date

***We are an Equal Opportunity Employer***

*Revised 11-1-01*

The following information is collected to complete Equal Opportunity Reports required by law. You are **NOT LEGALLY OBLIGATED** to provide this information.

Racial/Ethnic Groups

White             Asian/Pacific Islander             Black (African American)

American Indian    Hispanic    Alaskan Native    Other

Date of Birth \_\_\_\_\_            Sex:  Male    Female