

EDUCATION

High School/GED: _____
Name of School *City* *State*
Number of years completed: _____
Did you graduate? Yes No
Did you obtain a GED? Yes No
What are your future educational plans, if any: _____

College or University: _____
Name of School *City* *State*
Number of years completed: _____
Course pursued/Degree Granted: _____

Business, Technical or:
Trade School/College: _____
Name of School *City* *State*
Number of years completed: _____
Course pursued/Degree Granted: _____

Please list any special job-related skills, certifications, and qualifications acquired from education, employment, volunteer work, or military service which you feel may be helpful in considering your application.

REFERENCES

Please list two references you have worked with in the past.

Name: _____ Phone Number: _____
Address: _____ Relationship: _____

Name: _____ Phone Number: _____
Address: _____ Relationship: _____

EMPLOYMENT HISTORY

Starting with your present or most recent job, list your employment experience. You may include job-related military service assignments and/or volunteer activities that reflect your qualifications for employment. *(Please attach resume, if applicable, in addition to filling out below.)*

Employer: _____ Phone Number: _____
Address: _____ Immediate Supervisor: _____

Employment Dates: From: _____ To: _____

Job Title: _____

Salary/Hourly Rate: _____

Reason for leaving: _____

May we contact this employer? Yes No

If no, state the reason: _____

Employer: _____ Phone Number: _____
Address: _____ Immediate Supervisor: _____

Employment Dates: From: _____ To: _____

Job Title: _____

Salary/Hourly Rate: _____

Reason for leaving: _____

May we contact this employer? Yes No

If no, state the reason: _____

Employer: _____ Phone Number: _____
Address: _____ Immediate Supervisor: _____

Employment Dates: From: _____ To: _____

Job Title: _____

Salary/Hourly Rate: _____

Reason for leaving: _____

May we contact this employer? Yes No

If no, state the reason: _____

(If you require additional space, please continue on a separate sheet of paper.)

APPLICANT'S STATEMENT

(Please indicate that you have read and understand each paragraph of the Applicant's Statement by placing your initials beside each paragraph.)

_____ I certify that this application was completed by me and that all entries on it and all information contained in (this application, resume, and any supplement thereof) is CORRECT and COMPLETE to the best of my knowledge. In the event of employment, I understand that false, misleading, or omitted information given in my application (or during interviews) may result in termination. I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision. I understand that an investigation may be made and information maybe obtained through interviews with the personal references and past employers listed. I further understand said background check may also involve Southfield Village obtaining a criminal background report, investigative consumer report, and/or driver's license verification. I hereby authorize Southfield Village, Inc., if they wish, to make such inquiries.

_____ I hereby release all parties, including but not limited to Southfield Village, personal references, and previous employers, from any and all liability for any injury or damage that may result from their furnishing information to Southfield Village concerning me or any action Southfield Village takes on the basis of such information.

_____ I understand that a physical examination is required after an employment offer is made, with a report submitted, to be eligible for employment at Southfield Village.

_____ I understand that this application is not a contract of employment and that any resulting employment relationship is for no fixed period of time and is terminable at any time and for any reason by Southfield Village, or by me. I further understand that statements which may be contained in policies, practices, handbooks, or other Southfield Village material do not create any guarantee of employment and that Southfield Village has the right to modify, amend, or terminate policies, practices, benefits plans, or other programs within the limits and requirements imposed by law. I understand that no representative of Southfield Village, other than a corporate officer, has the authority to enter into any agreement for any specific period of time or to make any agreement contrary to the foregoing and that any such agreement must be in writing, signed by an authorized officer, and be specifically for employment, to be binding on Southfield Village.

Date

Signature of Applicant

*This application will be considered active for one year
after the position for which you have applied has been filled.*

EMPLOYMENT/PERSONAL REFERENCES



GREENCROFT COMMUNITIES

6450 Miami Circle • South Bend, IN 46614
(574) 231-1000 • Fax (574) 231-5566

Applicant Name: _____ Social Security No.: _____

Position Applying For: _____

I have applied for employment with Southfield Village. Southfield Village is a not-for-profit organization affiliated with Greencroft Communities. The mission of Southfield Village is to serve older adults in a continuing care community context. I authorize them to investigate information necessary concerning my qualifications for the above named position. Please reply to the questions. I hereby release you from liability in supplying this information.

Signature of Applicant

Date

Applicant- Do NOT Write Below This Line

Name of Employer/Reference: _____

Address: _____ Phone #: _____

Position Held/Relationship: _____ From: _____ To: _____

Evaluation of Applicant

Comments

Accuracy/Attention to Detail/ Follow Through Excellent Good Fair Weak _____

Attendance Excellent Good Fair Weak _____

Ability to work well with others Excellent Good Fair Weak _____

Would you rehire this person? Yes No If no, please explain: _____

Is there anything else that you believe would be helpful for us to know about the applicant?

References given by: _____ Title: _____ Date: _____

Contacted by: _____ Title: _____ Date: _____