

The logo for Dove Estates Senior Living Community features the word "DOVE" in a large, dark blue, serif font. The letter "O" is replaced by a stylized white dove with a yellow beak and a yellow wing. Below "DOVE" is the word "ESTATES" in the same dark blue, serif font. Underneath "ESTATES" is the phrase "Senior Living Community" in a smaller, orange, sans-serif font.

DOVE
ESTATES
Senior Living Community

To Whom It May Concern:

I, _____,
(Print Name)

having made application of employment to Dove Estates Senior Living Community, grant permission to contact all current and previous employers and authorize them to release information concerning my employment and as well as any pertinent information these references might have, personal or otherwise.

I release all parties from all liability for any damage that may result from furnishing this information.

Applicant Signature

Date



APPLICATION FOR EMPLOYMENT

PLEASE ANSWER EACH QUESTION IN YOUR OWN HANDWRITING

Application must be completed in its entirety, if applicable, for the application to be processed

Name _____ Cell Phone No. _____
 First Middle Last

Address _____ Social Security# _____
 Street City/State Zip Code

Type of work desired: _____ Are you legally eligible to work in the US? YES or NO

Do you have any relatives employed in this company? _____ Name _____ Relationship _____

Have you worked at this company before? YES or NO; If yes, when? _____ Whom do you know personally in this company? _____

<p>Are you able to perform the essential functions of the job, per the job description?</p> <p>YES _____ NO _____ If no, explain: _____</p> <p>_____</p>	<p>Are you willing to undergo a complete examination by a physician?</p> <p>YES or NO _____</p>
--	---

School Record	Name of School and Location	Course	Graduate/ Give Degrees	Hours Completed
High				///////
College or University (1)				
College or University (2)				
Vocational or Business				

SPECIAL TRAINING: (Write "Y" for Yes and "N" for No, or "N/A" for Not Applicable)

RN _____ LPN _____ CMA _____ CNA _____ CPR _____ Valid Kansas Driver's License _____ Other: _____

Do you type? _____ Operate business machines, including computers? _____

If so, list type and software: _____

List any other special training or experience you have received: _____

GENERAL EMPLOYMENT POLICY

1. To seek and obtain the most qualified person available and extend equal employment and advancement opportunities to all qualified persons without regard to race, religion, color, sex, age, disability, national origin, military status, genetic information, or any other characteristic protected by applicable federal or state law. To consider present employees whenever there is an opportunity for advancement, and to base promotion, job security and salary on ability, performance, experience, character and job attitude. To encourage employees to increase their value to the company through additional schooling and other forms of self-development.
2. AN EQUAL OPPORTUNITY EMPLOYER M/F/H/C/VET



CURRENT & PREVIOUS EMPLOYMENT—Begin with present or last employment:

FROM Mo.	Yr.	TO Mo.	Yr.	NAME, PHONE NUMBER and ADDRESS OF EMPLOYER	POSITION HELD	RATE OF PAY	IMMEDIATE SUPERVISOR	MAY WE CONTACT THIS EMPLOYER

REFERENCES—List at **least** three (3) professional references and one (1) personal reference, who are not relatives.

Name	Relation	Phone No.	Occupation

I understand and agree that:

1. Any material of misrepresentation or deliberate omission of a fact in my application may be justification for refusal of, or if employed, termination from employment.
2. I have reviewed the job description that matches the position I am applying, and have signed the job description acknowledging I can perform the essentials of the job and the physical requirements.
3. Dove Estates Senior Living Community may make a thorough investigation of my entire work and personal history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving and receiving of any information requested by Dove Estates Senior Living Community. Additionally, I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my being hired, or if hired, may subject me to immediate dismissal.
4. My employment, if hired, shall be considered Employment at Will. I understand Employment at Will to mean that I can be terminated or dismissed at any time, with or without just cause. I understand and agree that I may be required to take a physical examination by company physician, at company expense, at any time to determine if I am physically fit for the job I am to perform, and, I authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the duties and essential functions of a job for which I am being considered prior to employment or in the future during my employment with Dove Estates.
5. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime; shift work; a rotating work schedule; or a work schedule other than Monday through Friday.
6. A job offer is contingent upon completing several pre-employment steps, such as an authorized background check, drug screen, search within the registry offender list, and, in some cases, wage negotiations.
7. If hired I must provide proof of eligibility to work in the US on the **first** day of employment.

Dove Estates Senior Living Community is a smoke-free campus. I understand and accept these as conditions of my continuing employment. I further understand that this is an application for employment and **no employment contract** is being offered. **I have read and understand the above.**

Signature: _____ Date: _____

