

EDUCATION

Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 Equivalent Exam (List) _____

Name and location of high school attended: _____

List College(s), Vocational-Technical School(s) or other appropriate school(s) attended:

<u>SCHOOL</u>	<u>LOCATION</u>	<u>MAJOR</u>	<u>DEGREE</u>

PROFESSIONAL REGISTRATION, LICENSE AND ACCREDITATION

<u>STATE REGISTRATION NUMBER</u>	<u>ISSUE DATE</u>	<u>EXPIRATION DATE</u>	<u>TYPE OF LICENSE</u>

Please list any certifications you possess (CNA, ACLS, CCRN, etc.): _____

GENERAL

YES No

Have you ever been convicted of a crime, other than a traffic offense?

(Conviction of a crime is not an automatic bar to employment and will be considered only if job related. Furthermore, all circumstances will be considered.)

If yes, please explain _____

YES No

Have you ever applied for a position with a Presbyterian Homes of Georgia, Inc. facility?

If yes, when? _____ What position? _____

YES No

Have you ever been employed by a Presbyterian Homes of Georgia, Inc. facility?

If yes, when? _____ Position held: _____

What was your reason for leaving? _____

EMPLOYMENT EXPERIENCE

Please list your last five (5) employers, beginning with your most recent employment. If, at any time, you did not work for more than three (3) months between employers, please list the reason and length of time for this inactivity.

1. Employer _____ Ending Salary \$ _____
Address _____
Title _____ Employed: From: _____ / _____ To: _____ / _____
MONTH YEAR MONTH YEAR
Supervisor's Name _____ Phone (_____) _____
Describe Duties _____
Reason for leaving _____
May we contact employer: Yes or No If no, please explain. _____

2. Employer _____ Ending Salary \$ _____
Address _____
Title _____ Employed: From: _____ / _____ To: _____ / _____
MONTH YEAR MONTH YEAR
Supervisor's Name _____ Phone (_____) _____
Describe Duties _____
Reason for leaving _____
May we contact employer: Yes or No If no, please explain. _____

3. Employer _____ Ending Salary \$ _____
Address _____
Title _____ Employed: From: _____ / _____ To: _____ / _____
MONTH YEAR MONTH YEAR
Supervisor's Name _____ Phone (_____) _____
Describe Duties _____
Reason for leaving _____
May we contact employer: Yes or No If no, please explain. _____

4. Employer _____ Ending Salary \$ _____
Address _____
Title _____ Employed: From: _____ / _____ To: _____ / _____
MONTH YEAR MONTH YEAR
Supervisor's Name _____ Phone (_____) _____
Describe Duties _____
Reason for leaving _____
May we contact employer: Yes or No If no, please explain. _____

5. Employer _____ Ending Salary \$ _____
Address _____
Title _____ Employed: From: _____ / _____ To: _____ / _____
MONTH YEAR MONTH YEAR
Supervisor's Name _____ Phone (_____) _____
Describe Duties _____
Reason for leaving _____
May we contact employer: Yes or No If no, please explain. _____

IF ADDITIONAL SPACE IS REQUIRED, PLEASE USE SEPARATE PAPER AND ATTACH.

CLERICAL AND OFFICE APPLICANTS

Please list computer skills you possess:

Typing/WPM _____ 10 Key _____

Computer Experience _____

Software Experience _____

Other _____

MILITARY EXPERIENCE

Branch of U. S. Armed Forces Served _____

Dates of Duty: From: _____ To: _____

Duties _____

Rank at Discharge _____ Type of Discharge _____

REFERENCES

Please list three (3) professional references (local, if possible) who have known you over 3 years. Please do not include relatives.

NAME OF REFERENCE	YEARS KNOWN	CONTACT NUMBER
1. _____	_____	(____) _____
2. _____	_____	(____) _____
3. _____	_____	(____) _____

ADDITIONAL INFORMATION

Additional information you feel may help us in placing you in a position : _____

I understand that Presbyterian Homes of Georgia, Inc. may contact all persons, schools, and employers, current or former, to verify my employment or obtain information that may be required to arrive at an employment decision. I hereby release Presbyterian Homes of Georgia, Inc. and the aforementioned who provide such information from any liability or damages regarding the provision of such information.

Other than where employment is governed by an applicable collective bargaining agreement, I acknowledge that my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either Presbyterian Homes of Georgia, Inc. or myself. I understand that no representative of Presbyterian Homes of Georgia, Inc., other than Senior Management, has any authority to enter into any agreement that contradicts or modifies the foregoing in any manner. Any written or oral statements to the contrary are hereby expressly disavowed and should not be relied upon by current or prospective employees.

I acknowledge that consent to and successful completion of a drug test upon request at any time is a condition of employment and continued employment with Presbyterian Homes of Georgia, Inc. I hereby release Presbyterian Homes of Georgia, Inc. and any individuals who administer such tests from any and all liability and damages resulting from the administration of and reliance upon the results of any tests.

I hereby declare the information provided by me in this application for employment as true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for discharge.

Applicant Signature

Date

Please realize that incomplete applications will not be considered. We thank you for your interest in working with us. Have a good day.