COUNTRY INN

Enhanced Living Center

12651 Road 82, Paulding, OH 45879 | Phone: 419-399-2345 | Fax: 419-399-2341

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name	**Date**
Present Address	
Phone Number	**Email**
Social Security No.	**Referred By**

EMPLOYMENT DESIRED

Position Desired	**Shift Desired**
Date You Can Start	**Salary / Wages Desired**
Schedule: [ ] Part Time [ ] Full Time	**Will work part time until full time work is available:** [ ] Yes [ ] No
Are you currently employed? [ ] Yes [ ] No	**Can we contact your present employer?** [ ] Yes [ ] No
Have you ever worked for this company before? [ ] Yes [ ] No	**If yes, when? / What job position?**
Are you 18 years of age or older? [ ] Yes [ ] No	**How did you learn about this employment opportunity?**

FIVE-YEAR RESIDENCY CHECK

Have you lived in Ohio for the past 5 years?

[ ] Yes [ ] No

If no, list previous state(s) and address(es):

Printed Name: _____

Signature: _____

Date: _____

Verification by Administration: _____

Date: _____

OTHER

Have you been convicted of a felony within the last 5 years? [ ] Yes [ ] No

If yes, please explain:

Do you currently have any physical limitations to lifting, walking and/or standing? [ ] Yes [ ] No

REFERENCES

Please list professional references.

Name	Business	Phone Number

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EDUCATION HISTORY

Did you graduate from high school? [ ] Yes [ ] No	**Year Graduated**	**Name of School**
Did you graduate from college? [ ] Yes [ ] No	**Year Graduated**	**Name of College**
Title of Degree	**Degree:** [ ] 2-Year [ ] 4-Year	
Other Training, Education or Special Skills		
Military Service		

EMPLOYMENT HISTORY

Please provide details for your present or most recent employer and previous employers.

1. PRESENT / MOST RECENT EMPLOYER

Name of Present / Previous Employer		
Address		**Phone**
Job Title		
Current / Final Wage	**Name of Supervisor**	
May we contact your supervisor? [ ] Yes [ ] No	**Starting Date**	**Leaving Date**
Reason for Leaving		

2. PREVIOUS EMPLOYER

Name of Present / Previous Employer		
Address		**Phone**
Job Title		
Current / Final Wage	**Name of Supervisor**	
May we contact your supervisor? [ ] Yes [ ] No	**Starting Date**	**Leaving Date**
Reason for Leaving		

AUTHORIZATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representatives of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I also affirm that I have read the “Job Description” for the job position I have applied for, and fully understand what is required of the job position. If hired I will perform the job duties as required and understand that failure to do so could be grounds for dismissal.

Date: _____ Signature: _____

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APPLICANT CONSENT TO REFERENCE CHECKING

Country Inn Enhanced Living Center is an equal employment opportunity employer dedicated to a policy of nondiscrimination in employment upon any basis, including race, color, creed, religion, age, sex, national origin, ancestry, sexual orientation, marital status, military status, or the presence of any non-job-related medical condition or handicap. Please keep in mind that the questions contained in this application are not intended to be discriminatory based on any non-job-related information.

REFERENCE CHECKING POLICY

We want you to know that we will be checking your references as part of our hiring process. This may include contacting your former employers, as well as friends, acquaintances and business associates. We may ask a series of questions about your personal background, work experience, character, education and personality.

AFTER READING THIS POLICY, PLEASE INDICATE YOUR AGREEMENT BY SIGNING IN THE SPACE PROVIDED:

I have read and fully understand the foregoing and voluntarily consent to allow Country Inn Enhanced Living Center to check my references by contacting any person whom they deem to be an appropriate reference. Questions may be asked about my personal background, work experience, personality, personal habits and education.

Applicant Signature: _____

Date: _____

Received By: _____

Date: _____

Administrative note: The application's internal-use section is reserved for staff. Do not write in the section below.

FOR OFFICE USE ONLY — DO NOT WRITE IN THIS SECTION	
Interviewed By:	
Comments:	
Date Hired:	**Approved By:**

Revised: 12/2023