



APPLICATION FOR EMPLOYMENT

This Facility's objective is to recruit, hire and promote the most qualified individuals without regard to race, color, creed, religion, national origin, sex, age, disability, Vietnam-era status, genetic information or any other status protected by law or regulation.

General Information

Please complete the application and answer all questions.

Today's Date	Are you 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If hired, you may be required to show proof of age.</i>		
Name (last)	(first)	(middle)
Current address:		
Cell Phone:	Home Phone:	
Email Address:		

Position applied for:	<input type="checkbox"/> Full time <input type="checkbox"/> Temporary <input type="checkbox"/> Other
Shift preferred: <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> NIGHTS	<input type="checkbox"/> Part time <input type="checkbox"/> On-call as needed
Have you ever worked for Eastern Star? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when?
Have you ever applied for a job at Eastern Star? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when?

FOR DRIVING PURPOSES ONLY

Do you have a valid driver's license? Yes No State License issued: _____

Have you had your Driver's License suspended or revoked in the last 3 years?
 Yes No

DL # if applicable _____
Class of License: _____

Education Information

Name of Schools	# of years completed	Type of diploma/ degree or certificate
High School:		
Colleges /Universities:		
Other- Business, Trade, Technical schools:		

Have you ever had your professional license or certification suspended, revoked, or restricted?

Yes No If yes, please explain _____

Describe any special skills or abilities that directly relate to the job for which you are applying?

References		
Name	address	phone number
Name	address	phone number
Name	address	phone number

Employment Information

Employer and Job Title:	Address:	
	City	State
	Zip Code	
Dates of employment: Month/ Year	Starting Pay \$	Telephone #
	Ending Pay \$	
Supervisors:	Reason for leaving?	

Employer:	Address:	
	City	State
	Zip Code	
Dates of employment:	Starting Pay \$	Telephone #
	Ending Pay \$	
Supervisors:	Reason for leaving?	

Employer:	Address:	
	City	State
	Zip Code	
Dates of employment:	Starting Pay \$	Telephone #
	Ending Pay \$	
Supervisors:	Reason for leaving?	

Are you presently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No May we contact your present employer?	What date would you be able to start working at Eastern Star?
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I hereby certify that all of the information in this application is complete and accurate to the best of my knowledge. I understand that any omissions or false or inaccurate statements in my application or interview may be justification for refusal to hire or termination of employment.

I hereby authorize Eastern Star and/or its duly authorized agents to contact all references, current and prior employers, listed or not listed, and to secure additional information about me concerning my qualifications for the position applied. I hereby release from liability Eastern Star and its representatives for seeking such information.

I hereby authorize all prior employers, schools, credit bureaus, Social Security Administration, law enforcement agencies, consumer reporting agencies, investigative companies, and any other persons, companies or governmental or other agencies to give Eastern Star any and all information concerning my current and previous employment and any pertinent information they may have, personal or otherwise, concerning my qualifications for the position applied. I release all persons or entities from all liability for any damage or injury that may result from furnishing information to Eastern Star Masonic Retirement Campus. I also release Eastern Star and all of its employees from all liability for any damage or injury that may result from reliance on the information furnished.

I understand and agree that I must meet all the physical standards established by Eastern Star to perform the essential functions of any job for which I am offered employment. I understand that if offered employment, I might be required as a condition of employment to take a physical examination. I also understand that during employment I might from time to time be subjected to physical examinations and/or physical ability tests to demonstrate that I can perform the essential functions of my job. I consent to the release of any and all medical information that is necessary to perform the job I am applying. I understand that I may also be required to take and pass a drug screening test.

EXCEPT AS MAY BE REQUIRED BY STATE LAW, EMPLOYMENT WITH EASTERN STAR MASONIC RETIREMENT CAMPUS IS AT – WILL. EMPLOYEES HAVE THE RIGHT TO END THEIR WORK RELATIONSHIP WITH THE CAMPUS, WITH OR WITHOUT NOTICE FOR ANY REASON. THE CAMPUS HAS THE SAME RIGHT. ANY BENEFIT PLAN, AND ANY VERBAL STATEMENTS MADE BY MANAGEMENT ARE NOT INTENDED TO CONSTITUTE A CONTRACT OF EMPLOYMENT, EITHER EXPRESS OR IMPLIED. NOR ARE THEY A GUARANTEE OF EMPLOYMENT FOR A SPECIFIC DURATION.

NO REPRESENTATIVE OF EASTERN STAR MASONIC RETIREMENT CAMPUS, OTHER THAN THE BOARD OF TRUSTEES, EXECUTIVE DIRECTOR OR HIS OR HER AUTHORIZED REPRESENTATIVE HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE BOARD OF TRUSTEES, EXECUTIVE DIRECTOR OR HIS OR HER AUTHORIZED REPRESENTATIVE AND THE EMPLOYEE.

I understand and agree that this application will remain active for a limited time. If I still want to be considered for a position with Eastern Star after this application expires, it is my responsibility to complete a new application.

I have read and I understand the statements above, and that my signature is consent to the statements provided.

Signature

Date