



## Application For Employment

We are an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## Personal Information

Name

|   |               |  |       |     |
|---|---------------|--|-------|-----|
| Address   |               | City   | State | Zip |
| Phone Number  | Mobile Number | Email Address  |       |     |
| Are You A U.S. Citizen?<br>Yes <input type="checkbox"/> No <input type="checkbox"/> |               | Have You Ever Been Convicted Of A Felony, Plead Guilty or No Contest<br>Yes <input type="checkbox"/> No <input type="checkbox"/> |       |     |

If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test?

Yes  No

Driver's License #  
If Driving.

Social Security  
Numbers are  
verified by  
E-Verify

If hired we will require proof of eligibility to work in the United States.

## Position

|  |                      |             |
|--|----------------------|-------------|
| Position You Are Applying For  | Available Start Date | Desired Pay |
| Employment Desired<br><input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Volunteer |                      |             |

## Education

| School Name | Location | Years Attended | Degree Received | Major |
|-------------|----------|----------------|-----------------|-------|
|             |          |                |                 |       |
|             |          |                |                 |       |
|             |          |                |                 |       |
|             |          |                |                 |       |

If you are applying for a Registered Nurse, L.P.N, C.N.A or other positions that require a license or certification please attach to this application along with your resume.

## Employment History

|                     |                   |       |  |
|---------------------|-------------------|-------|--|
| <b>Employer (1)</b> | Job Title         |       | Dates Employed<br>From                  To |
| Work Phone          | Starting Pay Rate |       | Ending Pay Rate                            |
| Address             | City              | State | Zip  |
| Reason for leaving  |                   |       |  |
| <b>Employer (2)</b> | Job Title         |       | Dates Employed<br>From                  To |
| Work Phone          | Starting Pay Rate |       | Ending Pay Rate                            |
| Address             | City              | State | Zip  |
| Reason for leaving  |                   |       |  |
| <b>Employer (3)</b> | Job Title         |       | Dates Employed<br>From                  To |
| Work Phone          | Starting Pay Rate |       | Ending Pay Rate                            |
| Address             | City              | State | Zip  |
| Reason for leaving  |                   |       |  |
| <b>Employer (4)</b> | Job Title         |       | Dates Employed<br>From                  To |
| Work Phone          | Starting Pay Rate |       | Ending Pay Rate                            |
| Address             | City              | State | Zip  |
| Reason for leaving  |                   |       |  |
| <b>Employer (5)</b> | Job Title         |       | Dates Employed<br>From                  To |
| Work Phone          | Starting Pay Rate |       | Ending Pay Rate                            |
| Address             | City              | State | Zip  |
| Reason for leaving  |                   |       |  |



**Please list (4) Four Professional References**

| Name | Address | E-mail | Phone | How Long Known |
|------|---------|--------|-------|----------------|
|      |         |        |       |                |
|      |         |        |       |                |
|      |         |        |       |                |
|      |         |        |       |                |

Canyonlands Care Center is dedicated to following all of the laws and regulations concerning our residents and staff. All applicants' information is run through government agencies such as DOPL, DACS, Department of Workforce Services, E-Verify and other agencies that verify employment, fingerprinting, drug testing and past history.

I certify that all the information submitted by me on this application is true and complete and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected and if I am employed my employment may be terminated at any time.

If hired I expressly authorize, without reservation, the company to contact and obtain information from all references, (personal and professional), employers, public agencies licensing authorities and educational institutions and to other wise verify the accuracy of all the information provided in this application. I hereby waive any and all rights and claims I may have regarding the employer, its' agents, employees or representatives for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the company and still wish to be considered for employment, it will be necessary for me to reapply.

This company does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, genetic information, sexual orientation or any other protected status under applicable federal, state or local law. No question on this application is used to limit or exclude an applicant from employment consideration on any basis prohibited by applicable federal, state or local law.

I also understand that the Utah is an 'at will' state. Which means that I may cease employment at any time with or without notice. The company also has the same right to terminate employment at any time with or without notice.

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release from employment.

|              |           |      |
|--------------|-----------|------|
| Printed Name | Signature | Date |
|              |           |      |

