



APPLICATION FOR EMPLOYMENT

To Applicant: Trillium Woods is an Equal Opportunity and Affirmative Action Employer and make all employment decision without regard to race, color, national origin, religion, sex, age, disability, status as a disabled veteran or veteran of the Vietnam War, or any other class protected under local, state, or federal law. We deeply appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications.

PERSONAL INFORMATION

PLEASE PRINT ALL INFORMATION:

Date: _____

Name _____
Last First Middle

Present Address _____
Street Apt. City State Zip Code

Previous Address: _____
Street Apt. City State Zip Code

How long have you lived at present address? _____ How long at previous address? _____

Telephone#: _____ Are you at least 18 years old? _____

Email _____

Are you legally eligible for employment in the USA? _____ Do you have reliable transportation to work? _____

Position(s) you are applying for: _____ Rate of pay expected per hour \$ _____

Work Status Needed (circle your preference): FULL-TIME PART TIME PRN

Please list your preferred shift (work hours): 1st Choice _____ 2nd Choice _____

Were you previously employed by Trillium Woods? _____ If yes, what year? _____

How did you learn of this position? _____

Have you ever been bonded: _____ If yes, for what job (s) ? _____

Are you excluded from participation in Federal Health Care Programs? _____ If yes, please explain:

On what date would you be available to begin work? _____

EMPLOYMENT RECORD

List below present and past employment, beginning with your most recent. Please complete all information in full even when submitting a resume.

1. Company Name: _____

Address: _____ Phone number: _____

Supervisor Name: _____

Position Held: _____

Start Date: _____ End Date: _____ Salary: _____

Reason for leaving: _____

2. Company Name: _____

Address: _____ Phone number: _____

Supervisor Name: _____

Position Held: _____

Start Date: _____ End Date: _____ Salary: _____

Reason for leaving: _____

3. Company Name: _____

Address: _____ Phone number: _____

Supervisor Name: _____

Position Held: _____

Start Date: _____ End Date: _____ Salary: _____

Reason for leaving: _____

4. Company Name: _____

Address: _____ Phone number: _____

Supervisor Name: _____

Position Held: _____

Start Date: _____ End Date: _____ Salary: _____

Reason for leaving: _____

May we contact your former employers? _____ If not, which employers do you not want us to contact? _____

Why would you like to work at Trillium Woods? _____

EDUCATION RECORD

High School Name: _____ State: _____ Did you graduate? _____

GED Where: _____ State: _____

College Name: _____ State: _____ How Long? _____

Course of Study: _____ Degree: _____

Name: _____ State: _____ How Long? _____

Course of Study: _____ Degree: _____

Other: _____ How Long? _____

Course of Study: _____ Degree/Diploma _____

Certifications or Licensures (Please be specific): _____

List any other experiences, skills, hobbies or qualifications that may benefit our organization: _____

Please read and sign below:

Trillium Woods is a Smoke Free Workplace.

I understand that smoking is not permitted on the property of Trillium Woods.

I understand that nothing contained in this application or in the interview process is intended to create an employment contract between me and Trillium Woods. If I am employed by Trillium Woods, I will be an employee-at-will. This means that both Trillium Woods and I have the right to terminate my employment at any time, for any reason, with or without cause. I also acknowledge that upon receiving an offer of employment, I will be required to successfully complete all pre-employment requirements such as a physical, PPD skin test, drug screen, background check, OIG and references.

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice. In making this application for employment I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report that is made.

Signature _____

Date: _____

EMPLOYMENT/PROFESSIONAL REFERENCES

NO RELATIVES PLEASE.

<p>Name: _____</p> <p>Occupation: _____</p> <p>Address: _____</p> <p>_____</p> <p>Phone #: _____</p>	<p>Name: _____</p> <p>Occupation: _____</p> <p>Address: _____</p> <p>_____</p> <p>Phone #: _____</p>
<p>Name: _____</p> <p>Occupation: _____</p> <p>Address: _____</p> <p>_____</p> <p>Phone #: _____</p>	<p>Name: _____</p> <p>Occupation: _____</p> <p>Address: _____</p> <p>_____</p> <p>Phone #: _____</p>

LCS-Westminster Partnership V Trillium Woods

EQUAL EMPLOYMENT, AFFIRMATIVE ACTION VOLUNTARY SELF IDENTIFICATION FORM

Trillium Woods is an Equal Opportunity and Affirmative Action Employer. This policy governs our business activities in a manner which provides equal opportunity and treatment for all employees without regard to race, sex, color, religion, national origin, age, disability or veteran status.

As required by law, we must record certain information to be made a part of our Affirmative Action Program. Applicants for employment are also invited to participate in the Affirmative Action Program by reporting their status as disabled, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment. Please complete the information requested below. Thank you for your cooperation.

Please type or print

Name:	Date:
List the title of the position(s) applied for:	
<p>How did you learn about the job(s)?</p> <p> <input type="checkbox"/> Newspaper <input type="checkbox"/> Government Agency <input type="checkbox"/> Employment Agency <input type="checkbox"/> Job Service <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Employee <input type="checkbox"/> Other _____ <input type="checkbox"/> Internet Posting <input type="checkbox"/> Company Website Person referring you (if applicable): _____ </p>	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> I do not wish to self-identify	
<p><u>Racial Groups:</u></p> <p><input type="checkbox"/> White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North</p> <p><input type="checkbox"/> Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa</p> <p><input type="checkbox"/> Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.</p> <p><input type="checkbox"/> Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.</p> <p><input type="checkbox"/> American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.</p> <p><input type="checkbox"/> Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races</p> <p><input type="checkbox"/> I do not wish to self-identify</p>	

Veteran Status

Are you a veteran? Yes No

Vietnam Era Veteran — Defined as a person who served on active duty for a period of more than 180 days, and was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty occurred: 1) In the Republic of Vietnam between February 28, 1961, and May 7, 1975; or 2) Between August 5, 1964, and May 7, 1975, in all other cases; or 3) Was discharged or released from active duty for a service-connected disability if any part of such active duty was performed In the Republic of Vietnam between February 28, 1961, and May 7, 1975; or between August 5, 1964, and May 7, 1975, in all other cases.

Disable Veteran - Defined as (1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.

Special Disabled Veteran - Defined as a veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability: 1. Rated at 30 percent or more; or 2. Rated at 10 or 20 percent in the case of a veteran who has been determined under 38 U.S.C. 3106 to have a serious employment handicap; or 3. A person who was discharged or released from active duty because of a service-connected disability.

Other Protected Veteran - Defined as (a) an *active duty wartime or campaign badge veteran* who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense. (b) an **Armed Forces service medal veteran** who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209).

Armed Forces Service Medal Veteran - Defined as any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Recently Separated Veteran - Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one year period beginning on the date of such veteran's discharge or release from active duty.

I do not wish to self-identify

Disability Status

Individual with a Disability - Defined as a person who (1) has a physical or mental impairment which substantially limits one or more of his or her major life activity(s), (2) has a record of such impairment(s), or (3) is regarded as having such impairment(s). For purposes of this definition, an individual with disability(s) is substantially limited if he or she is likely to experience difficulty in securing, retaining, or advancing in employment because of the disability(s).

I do not have a Disability

I do not wish to self-identify