



Employment Application

PLEASE INDICATE LOCATION FOR WHICH YOU ARE APPLYING:

- | | | |
|--|---|--|
| <input type="checkbox"/> JEWISH HOMELIFE (ADMIN) | <input type="checkbox"/> THE WILLIAM BREMAN JEWISH HOME | <input type="checkbox"/> THE JEWISH TOWER |
| <input type="checkbox"/> BERMAN COMMONS | <input type="checkbox"/> THE COHEN HOME | <input type="checkbox"/> JHL MEDICAL SVCS. |
| <input type="checkbox"/> THE ONE GROUP | <input type="checkbox"/> WEINSTEIN HOSPICE | <input type="checkbox"/> THE ZABAN TOWER |

We offer equal employment opportunities to qualified applicants for employment without regard to race, color, sex, religion, national origin, age, disability, genetic information, or any other legally protected classification.

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	Zip	
Phone	E-mail		
Date Available	Type of Position Desired: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> PRN <input type="checkbox"/>		
Position Applied for:		How did you hear of this position?	
Shift(s) for which applying: Day <input type="checkbox"/> Evening <input type="checkbox"/> Night <input type="checkbox"/>		Available to Work: Weekends <input type="checkbox"/> Holidays <input type="checkbox"/>	
Are you legally authorized to work in the United States?		YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for or applied to any JHL entity listed above?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, where, when and position?

EDUCATION

High School	Address		
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>			Degree
College	Address		
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>			Degree
Other	Address		
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>			Degree
Other	Address		
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>			Degree

LICENSURE OR CERTIFICATIONS

Georgia License or Registration Number (RN, LPN, LCSW, etc.): _____
 Certification (CNA, etc.): _____
 OTHER: _____

PREVIOUS EMPLOYMENT

Please list all employment during the last fifteen (15) years, beginning with your present or most recent position.

Company			Phone ()		
Address			Supervisor		
Job Title		Starting Salary \$		Ending Salary \$	
Responsibilities					
From	To	Reason for Leaving			
May we contact for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Company			Phone ()		
Address			Supervisor		
Job Title		Starting Salary \$		Ending Salary \$	
Responsibilities					
From	To	Reason for Leaving			
May we contact for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Company			Phone ()		
Address			Supervisor		
Job Title		Starting Salary \$		Ending Salary \$	
Responsibilities					
From	To	Reason for Leaving			
May we contact for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>					

Please add other past employers with above format on a separate sheet of paper.

State additional information you feel may be helpful in considering your application: _____

ACKNOWLEDGEMENT

PLEASE READ CAREFULLY

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I authorize the Jewish HomeLife and its entities and/or any agent or representative of Jewish HomeLife and its entities to investigate and verify all statements contained in this application and any resume or similar documentation that I may submit during the hiring process. I authorize my former schools, employers, supervisors and references to disclose information about my education, employment, character, work performance, and general reputation. I hereby release the Jewish HomeLife and its entities, and any of my schools, employers, supervisors and references from any/all claims, liabilities or demands of any kind arising out of or related to Jewish HomeLife and its entities' investigation or any disclosures made during such investigation.

I understand that any false statement, omission, or misrepresentation on this application or contained in any resume or similar documentation that I may submit during the hiring process is sufficient cause for refusal to hire, or termination if I have been employed, no matter when discovered by Jewish HomeLife and its entities. I understand and agree that nothing contained in this application, or conveyed in any interview, is intended to create an employment contract. I further understand that if I am hired, my employment will be at will and without prior notice, at the option of either myself or Jewish HomeLife and its entities. I agree that should an employment offer be extended to me and accepted, I will fully adhere to the policies, rules and regulations of employment of the Jewish HomeLife and its entities. Jewish HomeLife and its entities reserve the right to revise its policies, rules and regulations of employment, in whole or in part, at any time.

Additionally, I freely and voluntarily agree to submit to a urinalysis (drug screen) as part of my application for employment. I understand that either refusal to submit to a urinalysis screen or failure to qualify according to the minimum standards established by Jewish HomeLife for this screen may disqualify me from further consideration for employment.

I further understand that upon commencement of employment with Jewish HomeLife, I may again be required to submit to a random urinalysis screen. I understand that refusal to take a requested urinalysis screen or failure to meet the minimum standards set for the screen may result in immediate suspension or discharge.

Signature:	Date:
Print Name:	

ALL JEWISH HOMELIFE COMMUNITIES ARE SMOKE-FREE WORKPLACES.