



APPLICATION FOR EMPLOYMENT

Date: _____

Last Name: _____

First Name: _____

Position Applying For: _____

Note to Applicants:

In addition to this Application for Employment, you will be invited to complete a Voluntary Self- Identification Survey.

Anthem Lakes LLC is a drug-free workplace. In accordance with federal, state and local laws, we conduct extensive pre-employment criminal background and drug screenings.

CONFIDENTIAL

When completing this application, please use black or blue ink, and please print except for your signature at the end. Anthem Lakes LLC is an Equal Opportunity Employer.

Last Name: First Name: Middle Name:

Current Address: City, State, Zip: County:

Home Telephone: Alternate Number:



Are you under the age of 18? Yes No

If hired, are you able to furnish proof that you are eligible to work in the USA? Yes No

Do you have a valid drivers license? Yes No If yes, license #/State: _____

Have you worked for Anthem Lakes LLC in the past? Yes No

If yes, when? _____

Do you have any relatives now employed by Anthem Lakes LLC? Yes No

If yes, who? _____

How did you find out about this employment opportunity? _____

Date available to start work: _____ Number of hours available per week: _____

What times are you available to work? _____

Are there days or times you are not available to work? _____

Are you able to perform the functions of this job without reasonable accommodations?

Yes No

Note: Please understand that a “Yes” answer to any of the following questions will not necessarily disqualify you from employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be considered when making any employment decisions.

Have you ever been convicted of a crime? Yes No

If yes, please explain:



Are you currently awaiting trial or sentencing for any criminal offense? Yes No

If yes, please explain:

Have you ever initiated an act of violence in the workplace? Yes No

If yes, please explain:

EDUCATION

Name of Schools	Years Completed				Did you graduate?		Degree / Major
	9	10	11	12	Yes	No	
High School / GED							
College / University							
Other							

PROFESSIONAL LICENSURES

License Type	Issuing State	License Number	Expiration Date

SKILLS



EMPLOYMENT HISTORY

Begin with your most recent employer. Do not complete this section with “refer to resume.”

All employers including your current employer may be contacted to verify this information.
 May we contact your current employer prior to an offer of employment? Yes No

Employer Name, City, State:	Supervisor Name and Phone:
Position Title:	Job Responsibilities:
Employed from: _____ to _____	Starting Salary: _____ End: _____
Reason for Leaving:	Eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer Name, City, State:	Supervisor Name and Phone:
Position Title:	Job Responsibilities:
Employed from: _____ to _____	Starting Salary: _____ End: _____
Reason for Leaving:	Eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer Name, City, State:	Supervisor Name and Phone:
Position Title:	Job Responsibilities:
Employed from: _____ to _____	Starting Salary: _____ End: _____



Anthem Lakes

Waterview Senior Living

Reason for Leaving:	Eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Employer Name, City, State:	Supervisor Name and Phone:
Position Title:	Job Responsibilities:
Employed from: _____ to _____	Starting Salary: _____ End: _____
Reason for Leaving:	Eligible for rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No

Please explain any gaps in your employment:

Have you ever been fired or asked to resign from a position? Yes No

If yes, please explain:

PROFESSIONAL REFERENCES

Name:	Position:	Relationship:
Email:	Telephone:	Years Known

Name:	Position:	Relationship:
Email:	Telephone:	Years Known

Name:	Position:	Relationship:
Email:	Telephone:	Years Known



Anthem Lakes
Waterview Senior Living

PERSONAL REFERENCES

Name:	Position:	Relationship:
Email:	Telephone:	Years Known

Name:	Position:	Relationship:
Email:	Telephone:	Years Known

Name:	Position:	Relationship:
Email:	Telephone:	Years Known