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## Application for Employment

Equal Opportunity Employer

Please provide complete and legible information. An incomplete application may affect your consideration for employment. If necessary, attach a separate sheet for additional information.

HOUSE OF MERCY, INC., is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally recognized protected basis under federal, state, or local law. The information collected by this application is solely to determine suitability for employment, verify identity, and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the Americans with Disabilities Act and certain state or local laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on HOUSE OF MERCY, INC. Please inform the company's personnel representative if you need help completing this application or to otherwise participate in the application process.

### GENERAL INFORMATION

Full Name _____			Date _____	
FIRST	MIDDLE	LAST		
Address _____				
STREET		CITY	STATE	ZIP CODE
Contact Number (_____) _____			Date available for work _____	
Alternate Contact Number (_____) _____			Email (optional) _____	
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Do you now, or in the future, require immigration sponsorship for work authorization (e.g., H-1B)? <input type="checkbox"/> Yes <input type="checkbox"/> No (If hired, verification will be required consistent with federal law.)				
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, you may be required to provide authorization to work.)				

### POSITION INFORMATION

Position applied for: _____		Salary range expected: _____		
How did you learn about the position? _____				
Applying for:	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Seasonal/Temporary	
Please list any certifications or skills that may be on value in this position:				

**EDUCATION**

Type of School	School Name and Location	Number of Years Completed	Diploma, Degree, or Certificate Received	Course of Study or Major
High School or G.E.D. equivalent				
College or University				
Graduate School				
Vocational, Trade or other School				

**BACKGROUND INFORMATION**

Have you ever been discharged, suspended, or asked to resign from any position?  Yes  No

If yes, please explain.

For the purpose of verifying information on this application, have you ever worked or attended school under a different name at any of the organizations you have listed?  Yes  No If yes, specify name.

Have you ever been convicted of a crime, other than a minor traffic violation, that has not been expunged, sealed, pardoned, annulled, statutorily eradicated, or dismissed upon condition of probation? You are not required to disclose sealed or expunged records of conviction or arrest or expunged juvenile records of conviction or arrest.  Yes  No

Explain:

Note: Answering "Yes" does not necessarily preclude you from employment as we perform individualized assessments for all applicants.

**PERSONAL/PROFESSIONAL REFERENCES**

\_\_\_\_\_

List three [personal/professional] references (other than those listed as a current/former supervisor) that we may contact:

Name _____	Telephone No. ( ) _____
Email Address _____	Type of Acquaintance _____
Name _____	Telephone No. ( ) _____
Email Address _____	Type of Acquaintance _____
Name _____	Telephone No. ( ) _____
Email Address _____	Type of Acquaintance _____

Have you worked for HOUSE OF MERCY before?  Yes  No

When? \_\_\_\_\_ Job title: \_\_\_\_\_

Relatives of current employees of HOUSE OF MERCY, INC. will not be hired if they would be working for, or directly supervising, a current employee/cannot work together in the same department [or on the same team] as a current employee. If you receive a conditional offer of employment, you may be asked to identify any relative who is a current employee of HOUSE OF MERCY. For purposes of this policy, "relative" is defined as any person who is related by blood or marriage, or whose relationship with the employee is similar to that of people who are related by blood or marriage.

Have you signed or otherwise agreed to any non-solicitation, non-competition, or other similar post-employment restriction or agreement with your current or any prior employer?  Yes  No If yes, explain:

**EMPLOYMENT RECORD**

List all employment experience starting with the most recent or present employer, including US military service or training. **Resumes may not be substituted in lieu of completing the following employment information.**

Current Employer _____ Geographic Location _____ Your Position _____ Supervisor's Name/Title _____ May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, why? _____ Primary responsibilities _____ _____	Phone (____) _____ From _____ Month Year To _____ Month Year Reason for Leaving (for military service, include only your rank at time of discharge) _____ _____
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Current Employer _____ Geographic Location _____ Your Position _____ Supervisor's Name/Title _____ May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, why? _____ Primary responsibilities _____	Phone (____) _____ From _____ Month Year To _____ Month Year Reason for Leaving (for military service, include only your rank at time of discharge) _____
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**PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING**

1. I understand, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment drug test after receiving a conditional offer of employment and must receive a negative result for illegal drug use before being permitted to commence work with HOUSE OF MERCY, INC.

\_\_\_\_\_ Initials

2. I understand, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment medical examination after receiving a conditional offer of employment and must meet the qualifications for the position, with or without reasonable accommodation, before being permitted to commence work with HOUSE OF MERCY, INC.

\_\_\_\_\_ Initials

3. I understand, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background, driving record, credit history and other matters related to my suitability for employment. The offer is contingent upon the successful completion and outcome of the background check. I understand that a separate disclosure and consent form will be provided to me prior to any background check.

\_\_\_\_\_ Initials

4. I understand employment with HOUSE OF MERCY, INC., is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

\_\_\_\_\_ Initials

5. I authorize HOUSE OF MERCY, INC., and its representatives to contact my current and former employers (with the exception of my current employer, if I have marked "May we contact?" on page 2 of this application as "No"), schools, references, and other persons or organizations I have named in this application for the purpose of verifying the information I have provided. I release my current and former employers, schools, references, and other persons or organizations named in this application from any liability resulting from the information released. I authorize employers, schools, and other persons or organizations named in this application to provide any information or transcripts requested.

\_\_\_\_\_ Initials

6. I hereby certify that, if employed, my employment with HOUSE OF MERCY, INC., will not conflict with, violate, breach, or result in default under, any contract, agreement, or understanding that I am a party to or am bound by, including any non-solicitation, non-competition, or other similar post-employment restriction or agreement I have with any current or former employer, other than the contracts, agreements, covenants, or understandings I have disclosed in this application, if any.

\_\_\_\_\_ Initials

7. **I understand and agree that, if hired, my employment will be "at-will", which means employment is for an indefinite period of time and may be terminated by myself or HOUSE OF MERCY, INC., at any time, with or without cause, and with or without notice.**

\_\_\_\_\_ Initials

8. I certify that all of the above information is true and complete, and I understand that any falsification or omission of information made by me may disqualify me from further consideration for employment or, if hired, may result in my termination at any time during the period of my employment, regardless of the amount of time that has passed.

\_\_\_\_\_ Initials

MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_