



Employment Application

Evergreen Community of Johnson County

11875 S. Sunset, Ste. 100 Olathe, KS 66061
 Phone: (913) 477-8227 • Fax: (913) 477-8001
 E-mail: danam@ecoic.org

This form has been designed to assist you in applying with us; all information given will be treated in a confidential manner. Please complete all information requested.

Name _____
Last First M.I.

Social Security No _____ Date _____

Position(s) Desired (Title & Department) _____

Shift(s) available _____

Salary Desired _____ Full-Time Part-Time Temp

Address (Street/City/State/Zip) _____

Telephone _____ Have you ever been employed by Evergreen Community of Johnson County (Formerly Johnson County Nursing Home)? If yes, please list dates of employment, position(s) held, and department(s):

Have you ever been interviewed for a job here? If yes, please give the date and position for which you interviewed _____

State your name at that time if different from present _____ List any relatives employed by us _____

As an adult, have you ever been convicted of an offense other than a minor traffic violation? Yes No
 (Convictions are evaluated by position and are not necessarily disqualifying). If yes, please explain below:

How did you learn about this position? _____

Are you able to perform the essential functions of the position you are applying for with ___ or without ___ reasonable accommodations? _____

EDUCATION

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 If you did not complete high school, do you have a GED? _____

School Level	School Attended	Address	Years	Major	Degree/ #Credits
High School					
College/University					
Graduate School					
Trade School					

SKILLS INVENTORY

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> CNA | <input type="checkbox"/> BSW or MSW | <input type="checkbox"/> Typing ___WPM | <input type="checkbox"/> General Maintenance |
| <input type="checkbox"/> CMA | <input type="checkbox"/> Activities Certif. | <input type="checkbox"/> Personal Computer | <input type="checkbox"/> HVAC |
| <input type="checkbox"/> RA | <input type="checkbox"/> Food Service | <input type="checkbox"/> MS Word | <input type="checkbox"/> Languages: _____ |
| <input type="checkbox"/> LPN-State | <input type="checkbox"/> General Acctg. | <input type="checkbox"/> MS Outlook | |
| <input type="checkbox"/> RN or BSN - State _____ | <input type="checkbox"/> Data Entry | <input type="checkbox"/> Other programs: _____ | |

Drivers License Type _____ State _____ CDL

Other Skills and/or Licenses _____

Volunteer Work/Internships (Job Related) _____

(For office use only)

Date Received: _____

Employment History:

Listing the most recent first, complete your employment record for at least the past five (5) years.

Use additional paper if necessary.

Last Name	First Name	SSN

Employer _____ Address _____
 From _____ to _____ Job Title _____ Salary _____ Reason for leaving _____
 Supervisor Name _____ Telephone _____ May we call for references? _____
 Briefly, explain duties _____

Employer _____ Address _____
 From _____ to _____ Job Title _____ Salary _____ Reason for leaving _____
 Supervisor Name _____ Telephone _____ May we call for references? _____
 Briefly, explain duties _____

Employer _____ Address _____
 From _____ to _____ Job Title _____ Salary _____ Reason for leaving _____
 Supervisor Name _____ Telephone _____ May we call for references? _____
 Briefly, explain duties _____

Employer _____ Address _____
 From _____ to _____ Job Title _____ Salary _____ Reason for leaving _____
 Supervisor Name _____ Telephone _____ May we call for references? _____
 Briefly, explain duties _____

Evergreen Community of Johnson County does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or in the provision of programs and services.

If employed, I understand that I must conform to the policies of Evergreen Community of Johnson County and to any departmental rules and regulations, and my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either ECOJC or myself. I hereby certify that the information given on all pages of this application is true and correct. I understand that any answers contrary to the truth may be grounds for dismissal or refusal to hire and that nothing has been withheld that would affect my employment. I authorize my former employers, educational institutions and other persons or entities identified in this application to provide any and all information or documents about me to ECOJC. I hereby relieve all individuals connected with such release from liability for providing this information. If employed, I understand that I must furnish information required pertaining to birthdate, sex, race, citizenship, marital status and number of dependents and would agree to conform to the rules and regulations of the Evergreen Community of Johnson County.

Applicant Signature: _____

Date: _____



**EMPLOYMENT
VERIFICATION
RELEASE**

By my signature I give ECOJC permission to inquire and obtain information from previous employers, education institutions and other references.

I hereby give all references, former employers and education institutions permission to give true, accurate and complete history of my work and performance without fear of reprisal.

Applicants Signature: _____ Date _____
Print Name: _____ Social Security # _____
Other Aliases or Names Used _____

(The rest to be completed by ECOJC and References / Employers)

From: Evergreen Community Of Johnson County To: (Former Employer) _____
Phone: 913-477-8227 Phone: _____
Fax: 913-477-8001 Fax: _____
Attention / Contact: _____

The above named person is currently being considered for employment with ECOJC. This individual Indicates they previously worked for you, and by their signature above they are giving permission for you to disclose information related to their employment.

Position Held: _____ Employed From: _____ to _____ Last Salary: _____

Please rate the employee on the following performance standards:

	1 Low	2	3	4	5 Excellent
--	----------	---	---	---	----------------

Knowledge and ability to perform the duties of the position.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compassion and concern shown for residents / visitors or customers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability and attendance for scheduled hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude toward co-workers and company policies and procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reason for leaving your employment? _____

Given the opportunity, would you rehire this person? Yes _____ No _____

Information Provided by: _____ Title: _____

If you prefer, you may also call Dana Munaco at ECOJC to discuss by phone employment verification at (913) 477-8246.



**EMPLOYMENT
VERIFICATION
RELEASE**

By my signature I give ECOJC permission to inquire and obtain information from previous employers, education institutions and other references.

I hereby give all references, former employers and education institutions permission to give true, accurate and complete history of my work and performance without fear of reprisal.

Applicants Signature: _____ Date _____
Print Name: _____ Social Security # _____
Other Aliases or Names Used _____

(The rest to be completed by ECOJC and References / Employers)

From: Evergreen Community Of Johnson County To: (Former Employer) _____
Phone: 913-477-8227 Phone: _____
Fax: 913-477-8001 Fax: _____
Attention / Contact: _____

The above named person is currently being considered for employment with ECOJC. This individual Indicates they previously worked for you, and by their signature above they are giving permission for you to disclose information related to their employment.

Position Held: _____ Employed From: _____ to _____ Last Salary: _____

Please rate the employee on the following performance standards:

	1 Low	2	3	4	5 Excellent
--	----------	---	---	---	----------------

Knowledge and ability to perform the duties of the position.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compassion and concern shown for residents / visitors or customers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability and attendance for scheduled hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude toward co-workers and company policies and procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reason for leaving your employment? _____

Given the opportunity, would you rehire this person? Yes _____ No _____

Information Provided by: _____ Title: _____

If you prefer, you may also call Dana Munaco at ECOJC to discuss by phone employment verification at (913) 477-8246.

EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE

Evergreen Community of Johnson County is requesting the following information from all job applicants in order to evaluate results of its job recruitment efforts. This information will have no bearing on the hiring process.

Your voluntary cooperation will be appreciated.

Name: _____

Date: _____

Position applied for: _____

Sex: Female _____ Male _____

Age: Under 18 _____ 40 or older _____

ETHNIC CATEGORY: (*Check only one*)

- 1. White
- 2. Black
- 3. Hispanic (All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race)
- 4. Asian or Pacific Islander
- 5. American Indian or Alaskan Native (Includes all persons having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.)

If you are not a citizen of the U. S., do you have working papers, which allow you to be legally employed in this country?

Yes _____ No _____