



PLEASE MAIL OR FAX COMPLETED APPLICATION TO:

OFFICE: 1828 Swift Ave # 202 | Kansas City, MO 64116  
FAX: 816.471.3080

**EMPLOYMENT APPLICATION**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate: \_\_\_\_\_

Are you 18 years or older?  Yes  No

Have you ever been convicted of a crime?  Yes  No

**EMPLOYMENT DESIRED**

Position: \_\_\_\_\_ Date Available: \_\_\_\_\_  FT  PT

Are you employed now?  Yes  No

Have you ever applied to this company before?  Yes  No

If yes, where and when? \_\_\_\_\_

How did you learn of our agency? \_\_\_\_\_

**EDUCATION**

	Name & Location of School	Course of Study	Degree / Diploma
Grammar School			
High School			
College			
Business Trade or Technical			

Subjects of Special Study: \_\_\_\_\_

**LICENSE / CERTIFICATION INFORMATION**

RN License #: \_\_\_\_\_ State: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

LPN License #: \_\_\_\_\_ State: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

CNA License #: \_\_\_\_\_ State: \_\_\_\_\_ Issue Date: \_\_\_\_\_

CMT License #: \_\_\_\_\_ State: \_\_\_\_\_ Issue Date: \_\_\_\_\_

## EMPLOYMENT HISTORY

(Starting with the most recent – list last four employers)

1) Name of Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Dates Worked from: \_\_\_\_\_ to \_\_\_\_\_ May we contact?  Yes  No

Reason for leaving: \_\_\_\_\_

2) Name of Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Dates Worked from: \_\_\_\_\_ to \_\_\_\_\_ May we contact?  Yes  No

Reason for leaving: \_\_\_\_\_

3) Name of Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Dates Worked from: \_\_\_\_\_ to \_\_\_\_\_ May we contact?  Yes  No

Reason for leaving: \_\_\_\_\_

4) Name of Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Dates Worked from: \_\_\_\_\_ to \_\_\_\_\_ May we contact?  Yes  No

Reason for leaving: \_\_\_\_\_

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have ever been employed. Furthermore, I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and with or without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary. I give the employer the right to investigate all references and to secure additional information about me, if job information and all other persons, corporations, or organizations for furnishing such information. The employer is an equal opportunity employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_