

Name: _____

Position Applying for: _____

Are You Seeking Full-Time (FT) or Part-Time (PT) Employment? FT or PT

If Part-Time, how many hours per week? _____

Salary Requirement: _____

Date Available for Employment: _____

Interviewed by: _____

Employment Application



Living Independently Forever, Inc. referred to as LIFE is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability. Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation regarding the application and/or interview process should notify our Human Resources office.

In compliance with the Federal Immigration Reform and Control Act of 1986, LIFE is required to verify, by the I-9 form, that all employees employed by LIFE are legally eligible to work in the United States.

Personal

Last Name	First	Initial	Valid SS Number needed at time of hire
Other Name(s) Used:			Business Telephone #: E-Mail Address:
Address:			Home Telephone #: Cell Telephone #:
Position Applied for:	Referred By:		Current Salary Requirement:
Have you ever interviewed with LIFE before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, list date(s), job title(s) & location(s)	
Have you ever been employed by LIFE before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, list date(s), job title(s) & location(s)	
Do you have any relatives employed by LIFE? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, list date(s), job title(s) & location(s)	
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No		If under the age of 18, do you have a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No	

General

Yes No May we contact your current employer for references?

Yes No May we contact you at work? If so, what is your work telephone # _____
When is the best time to contact you? _____

Yes No If hired, will you be able to work full time, part time, split schedules, overtime? (circle appropriate category)

Yes No Are you legally eligible to work in the United States of America?

Yes No Will you be able to perform the essential job functions and attendance requirement for the position for which you are applying, with or without reasonable accommodations?

Yes No *(Job applicants required to drive a vehicle as part of their essential job function only)*
Do you currently have an active Massachusetts Driver's License?
(License would need to be presented for CORI and/or at time of hire)

Yes No *(Job applicants required to drive a vehicle as part of their essential job function only)*
Are you currently insured as a driver in the Commonwealth of Massachusetts?

Employed From / /	Employer Name:	Supervisor Name:	Starting Salary:
Employed Until / /	Employer Address:	Supervisor Phone #:	Ending Salary:
Job Title:		Reason for Leaving:	
Duties & Responsibilities:			
Supervisor Reference Name & Phone # :			
Employed From / /	Employer Name:	Supervisor Name:	Starting Salary:
Employed Until / /	Employer Address:	Supervisor Phone #:	Ending Salary:
Job Title:		Reason for Leaving:	
Duties & Responsibilities:			
Supervisor Reference Name & Phone # :			

Schedule Availability--Please Note AM or PM						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Certification & Authorization

I certify that all information I have provided in order to apply for and secure work with LIFE, is true, complete and correct. I understand that any information provided by me that is found to be false, misleading, incomplete or misrepresented in any respect, will be sufficient cause to 1) cancel further consideration of this application or 2) immediately discharge me from the employers' service, whenever it is discovered, regardless of the time elapsed after discovery.

I expressly authorize, without reservation, LIFE management to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all the information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding LIFE and its management, for seeking, gathering, and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me. I further authorize LIFE to provide any post-employment references regarding my employment with LIFE, if they are requested in writing. I also authorize LIFE to obtain a CORI, credit and/or consumer check and other civil/criminal background checks including fingerprinting if necessary to the job for which I am applying.

I understand that LIFE does not lawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment, on a basis prohibited by applicable local state or federal law. I understand that this application remains current for 90 days. At the conclusion of that time, if I have not heard from LIFE and still wish to be considered for employment, it may be necessary to reapply and fill out a new application.

If I am hired by LIFE, I understand that I am free to resign at any time, with or without cause and without prior notice, and that LIFE reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of LIFE is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the CEO of LIFE.

In the event of any unresolved employment issue, which cannot be resolved through the established through the Problem Resolution Procedure, I understand that as a condition of my employment with LIFE that all LIFE employees will be required to participate in the company's mediation and arbitration program. I agree to participate in, and abide by the terms and conditions of the American Arbitration Association and its National Rules for the Resolution of Employment, as the sole form of problem resolution. I further understand that any decision or award by an arbitrator made under these rules is exclusive, final and binding, for both parties, their beneficiaries, executors, administrators, successors and assigns.

I understand that it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

I certify that I have read, fully understand and accept all terms of the foregoing Application Statement.

Signature

Date