

# **The Victorian at Riverside Employment Application**

**FOR THIS TYPE OF EMPLOYMENT STATE LAW REQUIRES  
A CRIMINAL RECORD CHECK INCLUDING FINGERPRINTING AND  
A CLEAR RECORD ON THE STATE NURSE AIDE REGISTRY  
AS A CONDITION OF EMPLOYMENT**

Thank you for choosing The Victorian at Riverside as a place where you would like to work. We have very high standards applicants must meet before they can become our employee. Our present employees are a very vital part of our organization and have been selected by these same high standards.

The Victorian at Riverside is an equal opportunity employer providing the same employment opportunities to all applicants regardless of race, color, age, religion, sex, marital status, national origin, or mental or physical handicap/disability, or veteran status.

By applying for employment, you agree to comply with the policies of the organization, if hired, and you specifically agree to the following policies as confirmed by your signature below.

You provide the right for The Victorian at Riverside to conduct a full and thorough investigation into your background relative to previous employment, medical history, personal history, and any additional information deemed relevant by The Victorian at Riverside. Anyone listed on Abuse Registry will be excluded from employment. Certain and/or numerous criminal convictions will exclude one from employment at The Victorian at Riverside. A Drug Screen will be required for employment.

Any misrepresentation or omission of important facts as so deemed by The Victorian at Riverside in this application will disqualify you and will result in your discharge, if hired, upon discovery.

If hired, The Victorian at Riverside has the right to terminate your employment at any time and you have the right to resign at any time.

This employment application is considered active for ninety (90) days following the date of completion of the application.

I have read, I understand, and I agree to the above.

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PRINT NAME

SIGNATURE

---

DATE OF APPLICATION

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PERSONAL INFORMATION

FULL NAME \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_  
Street City State Zip

Phone(s) \_\_\_\_\_

WHAT POSITION ARE YOU APPLYING FOR? \_\_\_\_\_

Are you 18 years of age or over? Yes \_\_\_\_\_ No \_\_\_\_\_ SS# \_\_\_\_\_

Motor Vehicle Operator Permit # \_\_\_\_\_ State \_\_\_\_\_

Have you ever applied here before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you worked here before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

If you worked here before, what department? \_\_\_\_\_

Can you confirm you are legally eligible for employment in the U.S. by presenting a Driver's license, SS Card, Birth Certificate or INS Documents? \_\_\_\_\_

What qualities do you have which you feel would be a welcome addition to our organization?  
\_\_\_\_\_  
\_\_\_\_\_

Relatives or Friends who work here: \_\_\_\_\_

Have you ever been convicted of a felony or released from prison within the last five (5) years? \_\_\_\_\_

If yes, please explain in detail the offense. \_\_\_\_\_  
\_\_\_\_\_

Date you can begin work? \_\_\_\_\_

Beginning pay required? \_\_\_\_\_

Are you on Lay Off? \_\_\_\_\_ If yes, from where? \_\_\_\_\_

Can you work: Any Shift? \_\_\_\_\_ Overtime? \_\_\_\_\_ Weekends? \_\_\_\_\_

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## EDUCATIONAL BACKGROUND

Provide the requested information on each of the following:

School Name/location	Years Completed	Course	Did you graduate?
Grade School_____			Y N
High School_____			Y N
College/Grad School_____			Y N
Specialized Education _____			

List any licenses, seminars, workshops, training courses, etc. you have or have participated in which would help qualify you for employment with our organization:

## WORKPLACE REFERENCES

List 3 individuals you have worked with/for (not related to you)

Name	Company	Occupation	Phone
1. _____			
2. _____			
3. _____			

## PERSONAL REFERENCES

List 3 individuals that you know personally (not related to you, not listed above)

Name	Company	Occupation	Phone
1. _____			
2. _____			
3. _____			

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**EMPLOYMENT HISTORY**

Please provide the requested information on your last 10 years of employment- beginning with your current or most recent employer. Use the back if additional space is required.

**EMPLOYER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

WHY DID YOU LEAVE OR WHY DO YOU PLAN TO LEAVE? \_\_\_\_\_

\_\_\_\_\_

WHAT DID/DO YOU LIKE MOST ABOUT YOUR JOB? \_\_\_\_\_

\_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

WHY DID YOU LEAVE OR WHY DO YOU PLAN TO LEAVE? \_\_\_\_\_

\_\_\_\_\_

WHAT DID/DO YOU LIKE MOST ABOUT YOUR JOB? \_\_\_\_\_

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**EMPLOYER:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMPLOYED FROM \_\_\_\_\_ TO \_\_\_\_\_

JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

WHY DID YOU LEAVE OR WHY DO YOU PLAN TO LEAVE? \_\_\_\_\_

\_\_\_\_\_

WHAT DID/DO YOU LIKE MOST ABOUT YOUR JOB? \_\_\_\_\_

\_\_\_\_\_

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What duties did you perform best for the above employers? \_\_\_\_\_

\_\_\_\_\_

Did you ever receive reprimands from these employers? \_\_\_\_\_

If yes, explain \_\_\_\_\_

\_\_\_\_\_

Please explain any gaps in your employment history.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there anything else you would like us to know about you or your work history?

**THANK YOU FOR APPLYING FOR A POSITION AT**  
**THE VICTORIAN AT RIVERSIDE**