

PLEASE PRINT CLEARLY IN INK



330 Conklin Street
Farmingdale, New York 11735
HR Phone: (516) 539-2300
HR Fax: (516) 539-2305

Gurwin Home Care Agency is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of age, sex, sexual orientation, race, color, creed, religion, ethnicity, national origin, alienage or citizenship, disability, marital status, military status, genetic information, domestic violence victim status or any other legally-recognized protected basis under federal, state or local laws, regulations or ordinances.

Applicants with disabilities may be entitled to reasonable accommodation under the terms of the Americans with Disabilities Act and certain state or local laws. A reasonable accommodation is a change in the way things are normally done that will ensure an equal employment opportunity without imposing an undue hardship on Gurwin. Please inform the Human Resources Department at 516-539-2300 if you need assistance completing any forms or to otherwise participate in the application process.

POSITION APPLIED FOR: _____ DATE: _____

PERSONAL

NAME: _____ PHONE: _____

E-MAIL ADDRESS: _____ CELL PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

STATUS: [] FULL TIME [] PART TIME [] PER DIEM [] ON CALL SALARY EXPECTED: _____

SHIFT PREFERENCE: [] DAY [] EVENING [] NIGHT

ARE YOU AT LEAST 18 YEARS OF AGE OR OLDER? [] YES [] NO

ARE YOU LEGALLY PERMITTED TO WORK IN THE UNITED STATES? [] YES [] NO (If hired, verification will be required consistent with federal law)

HOW DID YOU LEARN ABOUT THE EMPLOYMENT OPPORTUNITIES AT GURWIN? _____

WERE YOU PREVIOUSLY EMPLOYED AT ANY GURWIN ENTITY? (GURWIN CENTER, GURWIN INDEPENDENT HOUSING, GURWIN JEWISH~FAY J. LINDNER RESIDENCES, GURWIN JEWISH HEALTHCARE FOUNDATION AND/OR GURWIN HOME CARE AGENCY?) [] YES [] NO

IF YES, POSITION/DATE: _____

DO YOU HAVE ANY RELATIVES EMPLOYED AT GURWIN? [] YES [] NO

IF YES, STATE NAME AND RELATION: _____

List Most Recent Experience First

EMPLOYMENT HISTORY

Table with 3 rows and 2 columns for employment history. Each row contains fields for Employer, Address, Phone, Position, Supervisor, Employment Dates, Status, Reason for leaving, Last Salary, and Name (if different from present).

MILITARY SERVICE

BRANCH: _____ RANK: _____ FROM _____ TO _____

SPECIAL SKILLS OR TRAINING: _____

CRIMINAL BACKGROUND CHECK

GURWIN PERFORMS CRIMINAL BACKGROUND CHECKS ON ALL APPLICANTS FOR EMPLOYMENT. HAVE YOU EVER BEEN CONVICTED OF A CRIME (MISDEMEANOR OR FELONY, EXCLUDING TRAFFIC VIOLATIONS) THAT HAS NOT BEEN EXPUNGED, SEALED, PARDONED OR ANNULLED? **NOTE: YOU ARE NOT REQUIRED TO REVEAL ANY YOUTHFUL OFFENDER CONVICTIONS.**

YES NO RECORD

If you checked "YES," please explain below. A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe the nature of the crime and your subsequent rehabilitation.

EDUCATION

SCHOOL	NAME	LOCATION	COURSE/MAJOR	DID YOU GRADUATE?		DEGREE/ # OF CREDITS
				YES	NO	
HIGH						
NURSING						
COLLEGE						
GRADUATE						
OTHER						

LICENSED PROFESSIONAL

LICENSE/CERTIFICATE NUMBER	EXPIRATION DATE	NUMBER OF YEARS LICENSED

SPECIAL SKILLS

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the information I have provided to the foregoing questions is true and correct, and that no attempt has been made to conceal information. I authorize my former employers, schools and personal references to provide any information they may have regarding me, whether or not it is on their records. I hereby release them and their company from all liability for divulging same. I understand that if any information given by me in this application is found to be false or misleading, I will be subject to dismissal at any time during the period of my employment. I also understand that a criminal background check may be conducted. If employment is obtained under this application I will comply with all rules and regulations of Gurwin. I agree to be responsible for all property and equipment issued to me. I understand that Gurwin will hold me liable for any property or equipment not returned. I understand and agree that my employment is for no definite period of time and may be terminated at any time by Gurwin unless otherwise agreed to in writing. I also understand that no one has the authority to make any agreement concerning the terms and conditions of my employment with Gurwin unless the agreement is made in writing and signed by an authorized representative of Gurwin.

Applicant's Signature

Date

APPLICATION BECOMES VOID AFTER ONE YEAR