

PLEASE PRINT CLEARLY IN INK



68 Hauppauge Road  
Commack, New York 11725  
631-715-8600

*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**

Employer: _____	Employment Dates: From _____ To _____
Address: _____	Status: F/T ___ P/T ___ P/D ___
Phone: _____	Reason for leaving: _____
Position: _____	Last Salary: _____
Supervisor (Name & Title): _____	Name (if different from present): _____
Employer: _____	Employment Dates: From _____ To _____
Address: _____	Status: F/T ___ P/T ___ P/D ___
Phone: _____	Reason for leaving: _____
Position: _____	Last Salary: _____
Supervisor (Name & Title): _____	Name (if different from present): _____
Employer: _____	Employment Dates: From _____ To _____
Address: _____	Status: F/T ___ P/T ___ P/D ___
Phone: _____	Reason for leaving: _____
Position: _____	Last Salary: _____
Supervisor (Name & Title): _____	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**