



**Questions/Qualifications (Continued)**

Yes No

If they have been explained to you, are you able to meet the attendance requirements of the position?

The attendance requirements have not yet been explained to me.

Have you ever been bonded?

Have you ever plead "guilty" or "no contest" to, or been convicted of, a crime?

*Note: Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.*

If **yes**, please provide date(s) and details:

\_\_\_\_\_

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our company?

If **yes**, please explain:

\_\_\_\_\_

Have you lived anywhere other than this state in the last five years?

If **yes**, please list all previous addresses and dates:

\_\_\_\_\_

**Employment Experience (Start with most recent employer, please provide the following information)**

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

Starting Job Title: \_\_\_\_\_ Final Job Title: \_\_\_\_\_

Immediate Supervisor and Title (for most recent position held): \_\_\_\_\_

Immediate Supervisor Phone: \_\_\_\_\_ May we contact this supervisor for reference?  Yes  No

Dates employed: \_\_\_\_\_ to \_\_\_\_\_  
Month Year Month Year

Work performed/responsibilities:

\_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were things you liked least about the position? \_\_\_\_\_

Reason for leaving (if applicable): \_\_\_\_\_

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

Starting Job Title: \_\_\_\_\_ Final Job Title: \_\_\_\_\_

Immediate Supervisor and Title (for most recent position held): \_\_\_\_\_

Immediate Supervisor Phone: \_\_\_\_\_ May we contact this supervisor for reference?  Yes  No

Dates employed: \_\_\_\_\_ to \_\_\_\_\_  
Month Year Month Year

Work Performed/responsibilities:

\_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were things you liked least about the position? \_\_\_\_\_

Reason for leaving (if applicable): \_\_\_\_\_

**Employment Experience (Continued)**

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

Starting Job Title: \_\_\_\_\_ Final Job Title: \_\_\_\_\_

Immediate Supervisor and Title (for most recent position held): \_\_\_\_\_

Immediate Supervisor Phone: \_\_\_\_\_ May we contact this supervisor for reference?  Yes  No

Dates employed: \_\_\_\_\_ to \_\_\_\_\_  
Month Year Month Year

Work performed/responsibilities: \_\_\_\_\_

What did you like most about your position? \_\_\_\_\_

What were things you liked least about the position? \_\_\_\_\_

Reason for leaving (if applicable): \_\_\_\_\_

Please explain any gaps in your employment, other than those due to personal illness, injury or disability.

Have you ever been fired or asked to resign from a job?  Yes  No

If yes, please explain: \_\_\_\_\_

**Educational Background (Starting with your most recent school attended, please provide the following information)**

School: \_\_\_\_\_ Location: \_\_\_\_\_  
City State

Number of years completed: \_\_\_\_\_ Did you graduate?  Yes  No  Currently Enrolled

Course of Study/Degree(s): \_\_\_\_\_

School: \_\_\_\_\_ Location: \_\_\_\_\_  
City State

Number of years completed: \_\_\_\_\_ Did you graduate?  Yes  No  Currently Enrolled

Course of Study/Degree(s): \_\_\_\_\_

School: \_\_\_\_\_ Location: \_\_\_\_\_  
City State

Number of years completed: \_\_\_\_\_ Did you graduate?  Yes  No  Currently Enrolled

Course of Study/Degree(s): \_\_\_\_\_

**Specialized Skills and Qualifications** (Note: When answering these questions, please exclude any information that would reveal race, color, religion, national origin, ancestry, sex (including pregnancy, sexual orientation, and gender identity), disability, age, genetic information, or other similarly protected status.)

Please summarize any specialized skills, training, licenses/certifications/awards, continuing education, languages, relevant volunteer work or other relevant experience that would be of benefit in the position for which you are applying:

## References

Please list **three** business, professional or other persons who are **not** related to you and who have **not** been listed elsewhere on this application, who are familiar with your work experience and/or educational experience.

Name: \_\_\_\_\_ Title/Occupation: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Number of years known: \_\_\_\_\_

Name: \_\_\_\_\_ Title/Occupation: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Number of years known: \_\_\_\_\_

Name: \_\_\_\_\_ Title/Occupation: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Number of years known: \_\_\_\_\_

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work for this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents 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 information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be 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 supervisor or representative of the employer 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 employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that reasonable safeguards will be taken to protect all personal information provided or obtained in conjunction with this application for employment. My personal information may be shared with the employer's affiliate(s) and third parties engaged by the employer to perform services for the employer. Any personal information shared with an affiliate, or third party is to be used solely to perform the services requested by the employer.

**This company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her race, color, religion, national origin, ancestry, sex (including pregnancy, sexual orientation, and gender identity), disability, age, genetic information or any other protected status under applicable federal, state, or local law.**

**I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.**

### **DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

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

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

For electronic signature, please check the box below.

By placing an "X" in this box, I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement. The signature above serves as my electronic signature.



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hr@nursesfornewborns.org

**Application for Employment (continued)**

*(Please use this blank page to add any additional information or data that you'd like us to know about you.)*

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