



EMPLOYMENT APPLICATION

Today's Date: _____

PERSONAL DATA

Name: _____
(Last) (First) (Middle)

Address: _____
(Number and Street)

(City) (State) (Zip)

Social Security #: _____ E-mail Address: _____

Home Phone: _____ Cell Phone: _____

Do you have the legal right to work in the United States? Yes No

Are you at least 18 years of age? Yes No **(If no, working papers are required.)**

Have you ever been employed by ACHS? Yes No If yes when: _____

If any former employment, education or military service is under another name, please provide:

WORK INTEREST

Position Applied For: _____ (First Choice) _____ (Second Choice)

Availability: (Check all that apply)

- Full Time Days Weekends
- Part Time Evenings Holiday s
- Per Diem Nights Temporary

Salary Requirements \$ _____

How were you referred to ACHS?

- Employee (Name) _____
- Ad (Publication Name) _____
- Job Fair _____ (Location)
- Internet
- Walk in
- Other



EMPLOYMENT HISTORY

Please list your job history starting with your present or most recent employer (include military service). Please fill this section out completely, in addition to any resume you may be attaching. Attach a separate piece of paper with additional employment if needed.

<hr/> Employer	<hr/> Job Title	<hr/> Last Salary
<hr/> Address	<hr/> Phone	<hr/> Supervisor Name
Dates Employed From _____ To _____	Reason for Leaving _____	
Job Duties _____		

<hr/> Employer	<hr/> Job Title	<hr/> Last Salary
<hr/> Address	<hr/> Phone	<hr/> Supervisor Name
Dates Employed From _____ To _____	Reason for Leaving _____	
Job Duties _____		

<hr/> Employer	<hr/> Job Title	<hr/> Last Salary
<hr/> Address	<hr/> Phone	<hr/> Supervisor Name
Dates Employed From _____ To _____	Reason for Leaving _____	
Job Duties _____		

If currently employed, may we contact your employer? ___ Yes ___ No



Please list any special job related skills:

Typing Speed (WPM) _____ Data Entry Medical Terminology
 Software Proficiency _____ Shorthand Word Processing

EDUCATION

School	Name and Address of School	Course of Study/Major	Last Year Completed	Did you graduate?
High School			__ 1 __ 2 __ 3 __ 4	__ Yes __ No
College			__ 1 __ 2 __ 3 __ 4	__ Yes __ No
Other (Specify)			__ 1 __ 2 __ 3 __ 4	__ Yes __ No

Are you related to a current employee of AcuteCare Health System? Yes No

Please list 3 professional/work related references we may contact:

1. _____
2. _____
3. _____

Has your professional license or certification ever been suspended or revoked? Yes No

Have you ever been barred from the Medicare or Medicaid program? Yes No

EMERGENCY CONTACT

In case of emergency, please notify:

_____ (Name)

_____ (Address) _____ (Phone Number)



IMPORTANT INFORMATION YOU SHOULD KNOW

Thank you for considering AcuteCare Health Systems as a possible next step in your career. Before you proceed with the application, there are some things we want you to know. ACHS is dedicated to excellence. To that end, we seek employees who not only support our mission, but those who will actively contribute their talents and abilities. We seek individuals who will report to work on time as scheduled and look for opportunities to excel and make a difference. It is essential that every one of our employees possess and demonstrate excellent customer service skills. To best determine if a candidate meets our requirements, several interviews may be scheduled to meet with members of our team.

ACHS conducts an extensive background investigation and a post offer medical exam for all candidates who accept a position with us. An offer of employment is conditioned upon substantiation of information shown on the application and medical clearance. Our medical assessment includes a drug screening urinalysis. Failure to successfully complete the required medical assessment will result in a withdrawal of an offer. Our background investigation includes a criminal background check, references from current/former employers, and license/certification verification (if applicable). By signing the bottom of this page, you authorize. ACHS to investigate all statements made in this application. Any misrepresentation of fact or material omission of fact will be cause for rejection from consideration or, if employed, for immediate termination upon discovery.

To avoid potential conflict of interest issues, ACHS representative may not have any employment, consulting or other business relationship with a competitor, customer, supplier or provider who may influence business transactions with ACHS unless advance written permission is granted from a Compliance Officer. As such, employees must disclose any outside employment relationships, current or future, while employed by ACHS.

ACHS is an Equal Opportunity Employer. Employees are selected on the basis of qualifications without regard to race, color, religion, sex, sexual orientation, age, national origin, ancestry, physical or mental disability, marital status or veteran status.

Employees are subject to a six-month probationary period. ACHS can terminate employment at any time. Employees retain that same right. This application does not constitute a contract of employment. I have read the above information and fully understand it.

Signature of Applicant _____

Date _____

