



# EMPLOYMENT APPLICATION

Thank you for your interest in working with Vintage Knolls! Please complete this application in its entirety and submit to [jobs@vintageknolls.com](mailto:jobs@vintageknolls.com).

| Applicant Information                   |               |                  |
|---|---------------|------------------|
| Full Name (Last, First, Middle Initial) |               | Application Date |
| Street Address                          |               | Apt/Unit #       |
| City                                    | State         | ZIP Code         |
| Phone Number                            | Email Address |                  |

| Position of Interest & Availability   |   |
|---|---|
| Position Applied For  | Desired Pay   |
| How Did You Hear About Us? Ex: Online Ad, Walk-In, Employee Referral (include name), Other  | Date Available to Start Work  |
| Time Availability (Check All That Apply)<br><input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> PRN  | How Did You Hear About Us?  |
| Have You Been a PA Resident for the Past Two Years?<br><input type="checkbox"/> No <input type="checkbox"/> Yes   | Are You Legally Eligible for Employment in the United States?<br><input type="checkbox"/> No <input type="checkbox"/> Yes |
| Were You Previously Employed by Cardinal Senior Living?<br><input type="checkbox"/> No <input type="checkbox"/> Yes - Explain Where/When:   |   |
| If You Are Under 18, Can You Furnish a Work Permit?<br><input type="checkbox"/> No <input type="checkbox"/> Yes   |   |
| Have You Ever Been Convicted of a Crime? (Do not include convictions sealed or expunged pursuant to a court order.)<br><input type="checkbox"/> No <input type="checkbox"/> Yes - Please Explain: |   |

| Education - Licenses - Honors   |                 |            |                 |
|---|-----------------|------------|-----------------|
| High School Name & Location   | Years Completed | Graduated? | Course of Study |
| College Name & Location   | Major           | Graduated? | Degree          |
| Other Education - Ex: Trade School (Include Location), Conferences, Workshops, Seminars |                 |            |                 |
| Licenses & Certifications   |                 |            |                 |

| Military Service  |              |                   |
|---|--------------|-------------------|
| Branch  | Dates Served | Rank at Discharge |
| Type of Discharge (Please Include Explanation if Discharge was not Honorable) |              |                   |

## Employment History

Company (Please List Most Recent Employment Information First)

|                    |                 |   |
|--------------------|-----------------|---|
| Address            |                 | Phone   |
| Job Title          | Employed From   | Employed To   |
| Responsibilities   | Starting Salary | Ending Salary   |
| Reason for Leaving | Supervisor      | May We Contact Your Previous Supervisor for a Reference?<br><input type="checkbox"/> Yes <input type="checkbox"/> No - Explain: |

|                    |                 |   |
|--------------------|-----------------|---|
| Company            |                 |   |
| Address            |                 | Phone   |
| Job Title          | Employed From   | Employed To   |
| Responsibilities   | Starting Salary | Ending Salary   |
| Reason for Leaving | Supervisor      | May We Contact Your Previous Supervisor for a Reference?<br><input type="checkbox"/> Yes <input type="checkbox"/> No - Explain: |

|                    |                 |   |
|--------------------|-----------------|---|
| Company            |                 |   |
| Address            |                 | Phone   |
| Job Title          | Employed From   | Employed To   |
| Responsibilities   | Starting Salary | Ending Salary   |
| Reason for Leaving | Supervisor      | May We Contact Your Previous Supervisor for a Reference?<br><input type="checkbox"/> Yes <input type="checkbox"/> No - Explain: |

## Professional References

*Please list individuals who are NOT related to you whom you have known for at least 2 years*

|           |       |             |
|-----------|-------|-------------|
| Full Name | Phone | Years Known |
| Full Name | Phone | Years Known |
| Full Name | Phone | Years Known |



VINTAGE KNOLLS

- SENIOR LIVING -

**Disclaimer & Signature**

The Employer is an Equal Opportunity Employer and does not discriminate in employment on the basis of age, sex, race, color, national origin, ancestry, citizenship, disability, or liability for service in the armed forces of the United States. This application is not used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law. I understand that any misrepresentation and/or omission of facts called or on my employment application and/or resume submitted, is cause for rejection or employment, to include subsequent dismissal from employment. I understand that this application is current for only 6 months. At the conclusion of this time, if I have not heard from Cardinal Senior Living and still wish to be considered for employment, I understand that it will be necessary to complete a new application.

I assert that I have no history of and have never been convicted of a violent crime and have never been dismissed from employment for abuse, neglect, or mistreatment of residents or clients. I understand that Cardinal Senior Living will complete a criminal background check and, if necessary, an FBI clearance on me. I further understand that my employment is contingent upon the results of those clearances meeting the employment guidelines of the PA Department of Human Services and the PA Office of Aging. I authorize Cardinal Senior Living to conduct an investigation of my background, as it pertains to employment history, criminal history, education verification, and a Motor Vehicle Record Report from any and/or all states. I specifically authorize the company to make any necessary contacts to the aforementioned investigations and give my permission to have any records and/or information released either verbally, in writing, or electronically to the company. Information obtained or reported by any agency and/or entity will be treated in a sensitive and confidential manner.

I understand that representatives of the company will obtain this information on a need-to-know basis. I do hereby remise, release, waive, and forever discharge each of the above named companies/corporations/agencies/entities, their respective agents, officers, and employees from any and all actions or cause of action, claim, demand or liability which I have now, or may ever have as a result of conducting an investigation of my background. I also agree to hold each of the above, from any claims I might otherwise have against them, for any damages and/or liability to me, resulting from any disclosures and of its results, and any conclusions drawn there from.

Applicant Signature

Date