



APPLICATION FOR EMPLOYMENT

LUMEN CHRISTI HOME OF VIRGINIA is an equal opportunity employer and upholds the principles of equal opportunity employment. It is the policy of LUMEN CHRISTI HOME OF VIRGINIA CORPORATION to provide employment, compensation and other benefits related to employment based on qualifications and performance, without regard to race, color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal or state law. As an equal opportunity employer, LUMEN CHRISTI HOME OF VIRGINIA CORPORATION intends to comply fully with all federal and state laws and the information requested on this application will not be used for any purpose prohibited by law. Disabled applicants may request any needed accommodation. This application is intended to allow you, the applicant, to provide LUMEN CHRISTI HOME OF VIRGINIA CORPORATION with the information and data so that your suitability and qualifications can be fairly determined for the position(s) for which you are applying. Please complete this application and answer all questions completely. Please print clearly in ink.

***PLEASE PRINT CLEARLY AND BE SURE TO SIGN THIS APPLICATION**

Date: _____

DATE OF BIRTH: _____

Last Name	First Name	Middle
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Social Security #	Date of Birth:	Home Phone # Cell Phone#
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Address

City	State	Zip-Code
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Have you been previously employed by LUMEN CHRISTI HOME OF VIRGINIA CORPORATION? YES NO

If Yes, when?

In what capacity?

Date (mm/yyyy)	Position Held
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How did you learn of the position that you are applying for?



- ☐ NewsPaper/ Print Advertisement
- ☐ Friend/Relative
- ☐ Employment Agency
- ☐ Job Service
- ☐ Radio/TV advertisement
- ☐ Staff

Name of Staff: _____

EMPLOYMENT DESIRED

Position(s) applied for _____

Shifts Preferences:

- ☐ First Shift - Days
- ☐ Second Shift - Evenings
- ☐ Third Shifts - Nights

Number of shifts/ Hours desired

- ☐ Full Time
- ☐ Part Time Hours desired: _____

Date available to start	Salary requested
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PERSONAL HISTORY

Are you a United States citizen or have a work permit which allows you to lawfully work in the United States? YES NO

If applicable, Visa Type: _____ Immigration No: _____

Are you at least 18 years old? YES NO

Are you ineligible to be employed with a Virginia licensed health care entity as a result of being found guilty by a court of law for abusing, neglecting, or mistreating individuals in a healthcare related setting? YES NO

If "Yes", please explain:

Explanation

Are you able to perform all of the duties required of the position you are applying for, without endangering yourself or compromising the safety, health, or welfare of the residents/clients or other staff persons? YES NO

If "No", please explain:



Explanation

EDUCATION

	Name and Location	Graduation Date	Course of study/Degree
High School			
College			
Other			

LICENSURE/CERTIFICATION/REGISTRATION

	Type of License/Certification	Registration
Number		

List any relevant special skills or qualification that you may possess for consideration of the position you are applying for.

Qualifications:

EMPLOYMENT HISTORY

Please provide accurate and complete information. Start with present or the most recent employer.

May we contact and communicate with your present employer?

YES

NO

Employer:

Telephone No:



Address:	Employed From:	to:
Name of Supervisor:	Hourly Pay Start:	Last:

Position and Responsibility:

Reason for leaving:

Employer:	Telephone No:	
Address:	Employed From:	to:
Name of Supervisor:	Hourly Pay Start:	Last:

Position and Responsibility:

Reason for leaving:

Employer:	Telephone No:	
Address:	Employed From:	to:
Name of Supervisor:	Hourly Pay Start:	Last:



Position and Responsibility:

Reason for leaving:

MILITARY SERVICE

Branch:

From:

To:

What were your duties?

Duties:

Did you receive any special training?

YES

NO

If "Yes", please describe:

Describe:

REFERENCES

Names of friends or relatives, if any, currently employed by LUMEN CHRISTI HOME OF VIRGINIA CORPORATION.

Name:	Address:	Phone No:
Name:	Address:	Phone No:

Names of coworkers (No relatives) you have worked with and whom we may contact for a reference.

Name:	Address:	Phone No:
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Name:	Address:	Phone No:
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Please read the following statements completely and carefully before you initial and sign your name.

The Applicant HEREBY CERTIFIES that the answers given on this Application for Employment, including any statements or answers provided by the Applicant during interview, are true and correct. The Applicant fully authorizes LUMEN CHRISTI HOME OF VIRGINIA CORPORATION to contact any reference, past and present employers, persons, schools, law enforcement agencies and any other sources of information which may be relevant to the Applicant and the Application for Employment. It is understood and agreed that any misrepresentation, false statements, or omission by the Applicant will be sufficient reason for rejection of the Application for Employment or for dismissal from employment at any time, without recourse or liability to LUMEN CHRISTI HOME OF VIRGINIA CORPORATION.

I have read, understand and agree to the above statement.

(Please initial here). _____

If employed, the Applicant agrees to fully abide by all staff conduct and workplace standards, including professional ethics, safety rules, and a code of conduct for the LUMEN CHRISTI HOME OF VIRGINIA CORPORATION. The applicant understands that the LUMEN CHRISTI HOME OF VIRGINIA CORPORATION is committed to maintaining an alcohol and drug-free workplace. The Applicant is informed that the LUMEN CHRISTI HOME OF VIRGINIA CORPORATION requires employment physical exams with various safety screenings including a drug test as part of the hiring process. Also, if employed, the Applicant realizes that LUMEN CHRISTI HOME OF VIRGINIA CORPORATION conducts random drug testing of its employees. I have read, understand and agree to the above statement.

(Please initial here). _____

The Applicant is informed that this Application will remain on file for 90 days for consideration. After 90 days, if the Applicant remains interested in a position with LUMEN CHRISTI HOME OF VIRGINIA CORPORATION it will be necessary for the Applicant to recontact LUMEN CHRISTI HOME OF VIRGINIA CORPORATION.

SIGN HERE _____ DATE _____