



When would you be available to start? _____

Please list any relatives/friends that work at Fairport Baptist Homes

EDUCATION

School	Name and Address of School	Circle Last Year Attended	Diploma Degree	Course of Study
Elementary		5 6 7 8		
High School		1 2 3 4		
College		1 2 3 4		
Other Special Training		1 2 3 4		
School of Nursing		1 2 3 4		

Nursing/Professional

License/Certification No. and Type: _____ Date: _____

Have you ever been found guilty of unprofessional misconduct, or negligence in any profession?

Yes No

Are charges now pending against you for unprofessional conduct, professional misconduct, or negligence in any profession? Yes No

Have you ever surrendered any license in lieu of disciplinary procedure? Yes No

If "Yes" answered to any of the above three questions, please explain.

Are you legally entitled to work in the U. S.? Yes No



Have you ever been convicted of a crime (other than traffic violation)? Yes No

If yes, please explain:

Note: Prior criminal conviction is not necessarily a bar to employment.

Were you previously employed by any program of Fairport Baptist Homes? Yes No

If yes, please give dates: From: _____ To: _____

Have you ever worked at FBH through an agency or temporary agency? Yes ____ No ____

EMPLOYMENT EXPERIENCE

Please list all previous employers for the last 10 years, starting with your current employer. If additional space is needed, continue on a separate piece of paper.

EMPLOYER: _____ Dates: From _____ To _____
(Month/Year) (Month/Year)

Address: _____
_____ Base Rate of Pay _____ Per: _____

Phone: _____

Reason for Leaving: _____

Title: _____

Description of primary responsibilities: _____



EMPLOYER: _____ Dates: From _____ To _____
(Month/Year) (Month/Year)

Address: _____

_____ Base Rate of Pay _____ Per: _____

Phone: _____

Reason for Leaving: _____

Title: _____

Description of primary responsibilities:

EMPLOYER: _____ Dates: From _____ To _____
(Month/Year) (Month/Year)

Address: _____

_____ Base Rate of Pay _____ Per: _____

Phone: _____

Reason for Leaving: _____

Title: _____

Description of primary responsibilities:

EMPLOYER: _____ Dates: From _____ To _____
(Month/Year) (Month/Year)

Address: _____

_____ Base Rate of Pay _____ Per: _____

Phone: _____

Reason for Leaving: _____

Title: _____

Description of primary responsibilities:



EMPLOYER: _____ Dates: From _____ To _____
(Month/Year) (Month/Year)

Address: _____

_____ Base Rate of Pay _____ Per: _____

Phone: _____

Reason for Leaving: _____

Title: _____

Description of primary responsibilities:



PROFESSIONAL REFERENCES

(Please do not list friends or family members)

Table with 4 columns: Name, Address/Phone, Number of Years Known, Nature of Relationship

I authorize Fairport Baptist Homes to verify the accuracy of information provided on this application and to obtain reference information on my work performance. I hereby release Fairport Baptist Homes, and any party supplying references, from any liability for an employment decision based on such information.

With regard to my current employer, Fairport Baptist Homes: [] may [] may not (check one) contact my current employer.

I, _____, hereby give my authorization for the Fairport Baptist Homes, to review any and Please Print Full Name

all records pertaining to my background and criminal history.

Signature

Date

I certify that the information contained in this application is correct to the best of my knowledge, and understand that falsification of this application in any detail is grounds for disqualification from further consideration or for dismissal from employment in accordance with Fairport Baptist Homes' policy. I agree to conform to the rules and regulations of the Homes, and understand that the Homes follows a policy of at-will employment and that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time at the option of either Fairport Baptist Homes or myself. I further understand that no personnel recruiter or interviewer or any other representative of the Homes, other than the President, Chief Operating Officer or Director of Human Resources, has any authority to change the nature of the at-will employment relationship or enter into any agreement for employment for any specified period of time. No statements or representation is binding unless made in writing by the President, Chief Operating Officer or Director of Human Resources.

Signature

Date