

HIGHLAND FARMS

Retirement Community

Application for Employment

Please print.

Date _____

Personal

Name _____ Soc. Sec. No. _____
last first middle

Address _____

How long have you lived at the above address? _____ How long have you lived in NC? _____
(If you've lived at the above address for less than 5 years, please fill out the ADDRESS ADDENDUM FORM showing your addresses for the last 5 years.)

Tel. No. _____ Date of birth _____ Position applied for _____

Full-time [] Part-time [] (Days and hours _____) Day shift [] Evening shift [] Night shift []

Are you presently employed? _____ If so, where? _____

Date available _____ Is a friend or relative employed by Highland Farms? _____

If so, who? _____ Were you ever employed by HF? _____ When? _____

How did you learn of a job opportunity here? _____

Have you ever pleaded guilty, or been convicted of a crime other than a minor traffic violation? (An affirmative answer does not necessarily mean rejection of your application.) _____ If yes, please explain _____

Name, address & phone of person(s) to notify in case of emergency _____

List personal skills & experience related to this position _____

If you have been in the U.S. Armed Forces, list dates & branch _____

Education

Name & Location of School or College	Dates	Major Subject(s)	Did you graduate?	Certificate or license or degree

Former Employment Please list below or attach resume showing last 10 years employment history

Name & Address of Company	Supervisor Name & Tel.	Dates Employed From To		Position & Duties	Reason for Leaving

Highland Farms, Inc. does not discriminate in hiring or any other decision on the basis of race, color, religion, sex, citizenship, national origin, ancestry, Vietnam veteran status, or on the basis of age or physical or mental disability unrelated to ability to perform the work required. No question on this application is intended to secure information to be used for such discrimination.

I give Highland Farms, Inc. the right to make an investigation of my past employment, address, and activities, agree to cooperate in such investigation and release from all liability or responsibility all persons and companies supplying such information.

I understand that the North Carolina General Statutes require health care facilities to conduct criminal background checks on all employees, and that before I can be considered for employment I must consent and agree to provide adequate information to allow Highland Farms, with the assistance of appropriate state and federal agencies, to conduct this check. I understand that the law provides that I may be required to furnish fingerprints if I have lived in North Carolina for less than five years. In addition the statute states,

“Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.” [NCGS 131E-265(e)]

I understand that North Carolina law requires anyone under the age of 18 to obtain a Work Permit **BEFORE** starting to work.

I agree to take a drug test as a condition of employment. I consent to taking physical examinations as may be required by Highland Farms as the company shall designate. I understand that an offer of employment is contingent on the results of the drug test, and may be contingent on passing the physical examination which relates to the essential duties I would be required to perform.

I understand that my employment is at will, and that either party is free to terminate the employment relationship at any time without cause. I also understand that my employment may be terminated for any misstatement or omission of fact appearing on this application.

Applicant signature _____

Date _____

**APPLICATION FOR EMPLOYMENT
ADDRESS ADDENDUM FORM**

Name _____
last first middle

Address _____

From _____ to _____

Address _____

From _____ to _____

Address _____

From _____ to _____

Address _____

From _____ to _____

Address _____

From _____ to _____

Application Interview

Name of Applicant _____ Date _____

Comments _____

Employment Verification

Name of supervisor called	Comments

Background Check

Work Permit

Drug Screening

Signature of interviewer _____ Date _____

Applicant employed? _____ (Contingent upon negative drug test)

Position _____ Shift time _____

Wage rate \$ _____ Hours per pay period _____

Starting date _____ Full-time/Part-time _____

**AUTHORITY FOR RELEASE OF INFORMATION
STATE ACCESS ONLY**

I authorize the North Carolina Department of Justice through the State Bureau of Investigation, Division of Criminal Information to perform a North Carolina criminal history record information check in connection with my application for employment, my employment or volunteer services

with _____
pursuant to N.C.G.S. 114-19.3, 131D-40 or 131E-265.

(Print or Type)

Last Name	First	Middle	Maiden
_____	_____	_____	_____

Social Security Number	Date of Birth	Sex	Race
_____	_____	_____	_____

I understand that the North Carolina State Bureau of Investigation, Division of Criminal Information, and its officials and employees shall not be held legally accountable in any way for providing this information to the above named Health Care Provider, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the Health Care Provider cannot provide a **hard copy** of the results of this criminal history record check to me.

Applicant's/Employee's/Volunteer's Signature

Date

This request form must be accompanied with a transmittal letter from the Authorized Official or Individual requesting criminal history record information. This request must be mailed to:

State Bureau of Investigation
Attn: Identification Section/Applicant Unit
Post Office Box 29500
Raleigh, North Carolina 27626-0500

**ORI # HCPOTH017-HIGHLAND FARMS
RETIREMENT COMMUNITY**

**FINGERPRINT CARD CHECK - \$14.00 _____
NAME CHECK - \$10.00 _____**

01-132-03
Health Care Providers
December 3, 1997