



**DRUG SCREENING:** We are committed to maintaining a DRUG-FREE workplace. All offers of employment are contingent upon successful completion of a pre-employment drug screen.

**EMPLOYMENT PHYSICAL:** We are committed to maintaining a healthy and safe workplace. All offers of employment are contingent upon successful completion of pre-employment physical.

**REFERENCES:** We are concerned about bias in the workplace, violence in the workplace, falsified applications, and employee theft. By signing this application, you authorize us to conduct a personal background check and authorize others to provide us with information that is personal and confidential.

**An Equal Opportunity Employer**

**PERSONAL INFORMATION**

|                   |       |  |       |       |     |
|-------------------|-------|--|-------|-------|-----|
| Date              |       | Social Security Number   |       | Last  |     |
| Name              |       | Name   |       |       |     |
| Last              | First | Middle   | First |       |     |
| Present Address   |       | Street   | City  | State | Zip |
| Permanent Address |       | Street   | City  | State | Zip |
| Phone No.         |       |  |       |       |     |
| Referred By       |       | Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No |       |       |     |

**EMPLOYMENT DESIRED**

|   |                    |   |        |
|---|--------------------|---|--------|
| Position  | Date You Can Start | Salary Desired  | Middle |
| Are You Employed Now? <input type="checkbox"/> Yes <input type="checkbox"/> No                |                    | If So May We Inquire of Your Present Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No |        |
| Ever Applied to this Company Before? <input type="checkbox"/> Yes <input type="checkbox"/> No |                    | Where?  | When?  |

**EDUCATION**

|  | Name and Location of School | Circle Last Year Completed | Did You Graduate?   | Subjects Studied and Degree(s) Received |
|--|-----------------------------|----------------------------|---|---|
| Grammar School                           |                             |                            | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |   |
| High School                              |                             | 1 2 3 4                    | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |   |
| College                                  |                             | 1 2 3 4                    | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |   |
| Trade, Business or Correspondence School |                             | 1 2 3 4                    | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |   |

**GENERAL**

Subjects of Special Study or Research Work

Job Related Skills (typing, driver's license, etc.)

Activities Other Than Religious (Civic, Athletic, etc.)

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, SEX, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS

UNEMPLOYMENT HISTORY: Please account for any time(s) you were not employed in the last 10 years, after leaving school. You do not need to include periods of one month or less. (Note: Attach additional page(s) if necessary.)

You must account for all periods of unemployment.

| Time Period | Reason(s) Unemployed | Time Period | Reason(s) Unemployed |
|-------------|----------------------|-------------|----------------------|
| _____       | _____                | _____       | _____                |
| _____       | _____                | _____       | _____                |

**FORMER EMPLOYERS** List below your last four employers, starting with the last one first.

| Date<br>Month and Year | Name and Address of Employer | Salary<br>(upon leaving) | Position | Reason for Leaving |
|------------------------|------------------------------|--------------------------|----------|--------------------|
| From                   |                              |                          |          |                    |
| To                     |                              |                          |          |                    |
| From                   |                              |                          |          |                    |
| To                     |                              |                          |          |                    |
| From                   |                              |                          |          |                    |
| To                     |                              |                          |          |                    |
| From                   |                              |                          |          |                    |
| To                     |                              |                          |          |                    |

**REFERENCES** List below three persons not related to you, whom you have known at least one year.

|   | Name | Address | PHONE | Years<br>Acquainted |
|---|------|---------|-------|---------------------|
| 1 |      |         |       |                     |
| 2 |      |         |       |                     |
| 3 |      |         |       |                     |

Laurel Highlands Foundation, Inc.  
Enriching the Quality of Life



If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

**AUTHORIZATION**

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The Company retains the right to revise its policies or procedures, in whole or in part at any time.

Date

Signature

**AUTHORIZATION**

**PLEASE READ THE FOLLOWING CAREFULLY, INITIAL EACH PARAGRAPH, THEN SIGN BELOW.  
PLEASE COMPLETE AND SIGN ANY SEPARATE DOCUMENTS WHICH MAY BE ATTACHED.**

**PERSONALLY COMPLETED FORM HONESTLY AND ACCURATELY**

BY MY SIGNATURE AND INITIALS PLACED BELOW, I PROMISE THAT I HAVE PERSONALLY COMPLETED THIS APPLICATION. I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION PROVIDED IN THIS EMPLOYMENT APPLICATION (AND ACCOMPANYING RESUME, IF ANY) IS TRUE AND COMPLETE. AND I UNDERSTAND THAT ANY FALSE INFORMATION OR SIGNIFICANT OMISSIONS MAY DISQUALIFY ME FROM FURTHER CONSIDERATION FOR EMPLOYMENT, AND MAY BE JUSTIFICATION FOR MY DISMISSAL FROM EMPLOYMENT DISCOVERED AT A LATER DATE. I UNDERSTAND THAT ANY JOB OFFER WILL BE CONDITIONAL BASED ON THE SATISFACTORY REVIEW OF MY QUALIFICATIONS, INCLUDING ANY AND ALL BACKGROUND OR DRUG SCREENING WHICH MAY BE REQUIRED. \_\_\_\_\_ INITIALS

**DRUG & ALCOHOL SCREENING**

IF THE COMPANY MAKES A CONDITIONAL JOB OFFER. I GIVE PERMISSION FOR A PRE-EMPLOYMENT DRUG SCREEN. RESULTS WILL BE HELD IN CONFIDENCE BY LAUREL HIGHLANDS FOUNDATION, INC. EXCEPT WHERE RELEASE OF SUCH INFORMATION IS REQUIRED BY LAW. \_\_\_\_\_ INITIALS

**AUTHORIZATION TO OBTAIN INFORMATION**

I VOLUNTARILY AND KNOWINGLY AUTHORIZE ANY PAST EMPLOYER; EDUCATIONAL INSTITUTION; LAW ENFORCEMENT AGENCY; STATE, LOCAL OR FEDERAL AGENCY; MILITARY BRANCH; THE NATIONAL PERSONNEL RECORDS CENTER; PERSONEL REFERENCE; AND/OR OTHER PERSONS; TO GIVE RECORDS OR INFORMATION THEY MAY HAVE CONCERNING MY CRIMINAL HISTORY, MOTOR VEHICLE RECORD, EDUCATIONAL HISTORY, LICENSING, EMPLOYMENT (INCLUDING CHARACTER, EARNINGS HISTORY AND REASONS FOR TERMINATION) OR ANY OTHER INFORMATION REQUESTED BY LAUREL HIGHLANDS FOUNDATION, INC. TO DETERMINE MY ELIGIBILITY FOR EMPLOYMENT. \_\_\_\_\_ INITIALS

**RELEASE**

I VOLUNTARILY WAIVE ALL RECOURSE AND RELEASE ANY COMPANY, INDIVIDUAL OR ORGANIZATION FROM LIABILITY FOR COMPLYING WITH ANY REQUEST FROM THE COMPANY OR AGENTS OF THE COMPANY (INCLUDING ANY CONSUMER REPORTING AGENCY) TO OBTAIN ANY INFORMATION FROM ANY SOURCE WHATSOEVER RELATING TO MY APPLICATION FOR EMPLOYMENT. I FURTHER RELEASE THE COMPANY OR ANY INDIVIDUAL WITH THE COMPANY REGARDING THE USE OF ANY INFORMATION RECEIVED WHICH MAY HAVE BEARING ON MY APPLICATION FOR EMPLOYMENT. \_\_\_\_\_ INITIALS

**NOTIFICATION & COMPLIANCE WITH RULES**

I AGREE TO IMMEDIATELY NOTIFY LAUREL HIGHLANDS FOUNDATION, INC. IF I SHOULD BE CONVICTED OF A CRIME WHILE MY JOB APPLICATION IS PENDING, OR DURING MY EMPLOYMENT IF HIRED, IF I BECOME EMPLOYED, IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO COMPLY WITH THE RULES, REGULATIONS, POLICIES AND PROCEDURES OF LAUREL HIGHLANDS FOUNDATION, INC. \_\_\_\_\_ INITIALS

**AGREEMENT FOR AT-WILL EMPLOYMENT**

I UNDERSTAND AND AGREE THAT NOTHING CONTAINED IN THIS APPLICATION, OR CONVEYED DURING ANY INTERVIEW WHICH MAY BE GRANTED, OR DURING MY EMPLOYMENT IF HIRED, IS INTENDED TO CREATE AN EMPLOYMENT CONTRACT BETWEEN MYSELF AND LAUREL HIGHLANDS FOUNDATION, INC. IN ADDITION, I UNDERSTAND AND AGREE THAT IF YOU EMPLOY ME, IN CONSIDERATION OF MY EMPLOYMENT, MY EMPLOYMENT WILL BE AT-WILL, FOR NO DEFINITE OR DETERMINABLE PERIOD OF TIME, AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES OR SALARY, BE TERMINATED AT ANY TIME, FOR AN REASON, OR FOR NO REASON AT ALL, WITH OR WITHOUT PRIOR NOTICE, AT THE OPTION OF LAUREL HIGHLANDS FOUNDATION OR ME. I UNDERSTAND AND AGREE THAT NO PROMISES OR REPRESENTATIONS CONTRARY TO THE FOREGOING ARE BINDING ON LAUREL HIGHLANDS FOUNDATION UNLESS IN WRITING AND SIGNED BY ME AND AN AUTHORIZED OFFICER OF LAUREL HIGHLANDS FOUNDATION. I PROMISE THAT I HAVE NOT RELIED, AND WILL NOT RELY ON ANY ORAL OR WRITTEN STATEMENTS TO THE CONTRARY. I UNDERSTAND AND AGREE THAT THIS IS THE ENTIRE AGREEMENT BETWEEN LAUREL HIGHLANDS FOUNDATION AND ME REGARDING THE TERM OF MY EMPLOYMENT AND REPLACES ANY OTHER ORAL OR WRITTEN AGREEMENT OR UNDERSTANDING \_\_\_\_\_ INITIALS

**I CERTIFY THAT ALL OF THE INFORMATION PROVIDED BY ME ON THIS APPLICATION IS TRUE AND ACCURATE.**

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

**LAUREL HIGHLANDS FOUNDATION, INC. IS AN EQUAL OPPORTUNITY EMPLOYER. IT IS THE POLICY OF THIS COMPANY TO CONSIDER ALL JOB APPLICATIONS ON THE BASIS OF MERIT WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, AGE, NATIONAL ORIGIN, ANCESTRY, MARITAL STATUS, DISABILITY OR ANY OTHER PROTECTED CHARACTERISTIC.**