

The Villages, Inc. APPLICATION FOR EMPLOYMENT

2219 SW 29th Street
Topeka, KS 66611-1908
(785) 267-5900

Instructions: Please print all information and complete every part of this application. If there is a question that does not apply to you, mark "N/A." Do not leave any question unanswered. You may provide additional information if necessary.

Today's date: _____ Date you can start: _____

Position applied for: _____

How did you hear of this position: Employee referral ___ (Name) _____

Newspaper ad ___ Internet ad ___ Other _____

Full-time ___ Part-time ___ Hourly salary desired _____

Topeka homes ___ Lawrence homes ___ other _____

PERSONAL INFORMATION

Name:

First	Middle	Last
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Home Address:

Street	City	State	Zip Code
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Home Phone: _____ Other Phone: _____

List all names used in the past:

FOR OFFICE USE ONLY: Date application received: _____
Notes: _____
1 st interview _____ 2 nd interview _____ Action: _____

Please list the hours you are available for each day. (Please use a.m. or p.m.) If you are not available on a specific day, please write "no". Part-time employees are limited to fewer than 20 hours a week (averaged over each month).

Sunday _____
Monday _____
Tuesday _____
Wednesday _____
Thursday _____
Friday _____
Saturday _____

Have you ever been convicted of a felony, or of any crime relating to theft or dishonesty, or involving acts of violence?* Yes No If yes, please explain:

*Note: A conviction record will not necessarily disqualify an applicant from employment. The circumstances of the conviction(s) will be considered in relation to the nature and duties of the job for which application is made.

Are you a citizen of the United States, or specifically authorized to be employed in the United States?* Yes No

*Note: Federal law requires that you provide evidence and a sworn statement of your citizenship or work authorization if you are hired. Any offer of employment which you receive is contingent upon your providing this documentation and statement.

EMPLOYMENT HISTORY

May we contact your current employer? Yes No

List your last three jobs, or your last ten years of employment, whichever provides more information. Begin with your current employer.

1. Employer name _____
Address _____ Telephone number _____
Job Title _____ Duties _____
Name of Supervisor _____
Dates employed _____ to _____
Salary \$ _____ Reason for leaving _____

2. Employer name _____
 Address _____ Telephone number _____
 Job Title _____ Duties _____
 Name of Supervisor _____
 Dates employed _____ to _____
 Salary \$ _____ Reason for leaving _____
3. Employer name _____
 Address _____ Telephone number _____
 Job Title _____ Duties _____
 Name of Supervisor _____
 Dates employed _____ to _____
 Salary \$ _____ Reason for leaving _____
4. Employer name _____
 Address _____ Telephone number _____
 Job Title _____ Duties _____
 Name of Supervisor _____
 Dates employed _____ to _____
 Salary \$ _____ Reason for leaving _____

EDUCATION AND TRAINING

Name and address of high school _____

Did you graduate? Yes No

If "No," do you have a General Equivalency Diploma (GED)? Yes No

Please list technical or trade school, college, and post-graduate education, if any:

School/College	City/State	Level Completed	Degree	Major or Subjects
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

OTHER SKILLS/TRAINING

List all applicable licenses or certificates held, including state, license or certificate type and date issued: _____

Describe any other training, volunteer experience or qualifications which may help you in the position applied for: _____

Describe any applicable computer hardware/software, equipment or office machine skills and proficiency level of those skills: _____

REFERENCES

Please list three references, other than relatives, whom we can contact.

1. Name _____ Phone _____
Address _____
How long known? _____ Occupation _____
2. Name _____ Phone _____
Address _____
How long known? _____ Occupation _____
3. Name _____ Phone _____
Address _____
How long known? _____ Occupation _____

VETERAN STATUS

If you are a veteran of the armed forces of the United States, please provide the following information:

Military Branch: _____ Dates of Service: _____

Discharge Date: _____ Honorable Discharge? Yes No

AUTHORIZATIONS

Authorizations for previous employment release, driver's license, KBI, CANIS and consumer credit checks may be a part of this application and are to be completed and submitted with the application.

ACKNOWLEDGMENT AND CERTIFICATION

By signing below, I certify that the 1) answers and information set out in this application are true and correct; 2) information submitted in my résumé (if attached), is true and correct; and 3) statements and information provided in my interview(s), if any, are true, accurate and complete to the best of my knowledge. I acknowledge that if any answer, statement or information is not true, accurate, correct or complete, I may not be hired, or if hired, I may be discharged.

I authorize the investigation of all statements provided during the process of this application. I voluntarily and knowingly, unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information.

This authorization shall be valid one year from the date signed and a photographic or faxed copy of the authorization shall be as valid as the original.

I understand that as a condition of employment, I will be required to show original documentation including a driver's license and social security card and eligibility to work in the United States.

I understand that this application is not a contract of employment and that no one within The Villages has the authority to make oral contracts of employment. If hired, my employment relationship with The Villages is terminable at-will, with or without cause, by either myself or The Villages.

I also understand that in the event I am offered a position with The Villages, employment is conditioned upon my passing a physical examination and TB test within 30 days of employment which will be administered by a health care professional selected and paid for by me.

Applicant Signature

Date

**AUTHORIZATION FOR RELEASE OF EMPLOYMENT AND REFERENCE
INFORMATION**

I, _____, hereby authorize the release and disclosure of information to The Villages, Topeka, Kansas, my prospective employer, concerning my employment with your organization and/or my personal relationship with listed personal references. Upon written or telephone request, the employer/personal reference may release the following:

1. Dates of employment
2. Pay level
3. Job description and duties
4. Wage history
5. Attendance records
6. Written employee evaluations; and
7. Reason for termination of employment.
8. Personal reference information (personal references only)

Applicant signature

Date

***Required Fields must be completed**

*First Name _____ *Middle _____ *Last _____

*Date _____
month (xx) day (xx) year (xxxx)

*Alias or Maiden Names used if applicable:

*First _____ *Middle _____ *Last _____

*Current Street Address: _____

*City _____ *State _____ *Zip _____

*Prior Street Address: _____

*City _____ *State _____ *Zip _____

*Have you ever lived in another State? *Mark One with an X Yes _____ No _____

*If Yes. What State and Year/s? _____

*Home or Contact Phone: _____

*Date of Birth _____ / _____ / _____ *SSN: _____ / _____ / _____

*Drivers License or State Issued ID Number _____

*Date of Expiration? _____ / _____ / _____ *State of Issue _____

Applicant Release Agreement

In connection with any application made by me, I understand that you may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to my credit, criminal, driving, civil, personal, and other records and experiences, including claims involving me in the files of insurance companies, if any. These reports may also include information on education, employment experience, work habits, mode of living, general reputation, character, along with reasons for termination of employment from previous employers, if any, as well as previous salary(ies). I agree, that should I become an employee, my employer has the right to obtain any and all reports, at any time, during my employment.

Without reservation, I authorize any party or agency contacted to furnish the above-mentioned information and release all parties involved from any liability and/or responsibility for doing so. I hereby consent to any potential employer obtaining such information from All Background Checks, and/or any of their agents. This authorization and consent shall be submitted in an original, fax, email or copy form.

I, my heirs, personal representatives, successors and assigns, hereby release and hold harmless All Background Checks, and employer, and any of their employees, agents, directors, or commissioners from any and all liability, claims, claims bills or relief acts or legislative petitions, damages, both compensatory and punitive, costs and attorney's fees, whether arising at law or in equity, which may at any time arise out of the retrieval, distribution, storage or use of my criminal history for determination of my fitness as determined by the personnel or human resource staff, to be an employee of, or maintain my employment with.

I have the right to make a request to All Background Checks, upon proper identification and payment of any authorized fees, the information in its files on me at the time of my request. All Background Checks does hereby agree to provide the requested information in accordance with the Fair Credit Reporting Act and submit a written report via U.S. mail email, or fax.

By signing below, I acknowledge that I have read and understand this Authorization and Release form.

*Signature: X _____ *Date: _____

***On this Line Please Print your First, Middle, Last Name, and Date of Birth Clearly**