



*Bay Bluffs is an Equal Opportunity Employer. It is the policy of Bay Bluffs to afford an equal employment opportunity regardless of a person's race, religion, color, national origin, sex, age, marital status, height, weight or disability.*

## APPLICATION FOR EMPLOYMENT

Have you ever filed an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Position applied for:
If yes, when?		
Name (last, first, middle)		
Address (street, city, state, zip code)	How many years?	Telephone Number
Previous address (street, city, state, zip code)	How many years?	Social Security Number
Specify any days or times that you are not available for work:	What shift(s) are you willing to work?	
Salary Expectation: \$ _____ Per _____	Date available for work:	Employment status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Have you ever been employed by this Facility? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, in what department and position?	Date started: _____ Date left: _____
Reason for leaving:		
Are you a U.S. Citizen?	If you are not a U.S. Citizen, do you have a legal right to remain permanently in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	If employed, can you submit verification of your legal right to remain in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No
What prompted your application?		
Do you have a telephone at your place of residence? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have a reliable form of transportation available to you to go to and from work? <input type="checkbox"/> Yes <input type="checkbox"/> No		

## Military Service

Service: Branch:	Dates of Service:	From: _____ To: _____
Were you honorably discharged?		Reserve Status:
Describe any specialized training and duties:		

List your last four employers, or all employers in the last ten years, whichever is greater. Attach additional signed sheets if necessary. Also list and explain any period(s) of unemployment. Please answer all inquiries. "See resume" is not acceptable.

Employer's Name		Dates (month and year): From _____ To _____
Address (street, city, state, zip code)		Telephone
Supervisor (name and title)	Your title	Salary
Duties and responsibilities		
Reason for leaving		

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Address (street, city, state, zip code)		Telephone
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Address (street, city, state, zip code)		Telephone
Supervisor (name and title)	Your title	Salary
Duties and responsibilities		
Reason for leaving		

- Are you currently on "layoff" status and subject to recall  Yes  No
- Have you ever been discharged by an employer or resigned in lieu of discharge  Yes  No
- Have you ever been disciplined (other than discharged) by an employer?  Yes  No
- If you answered yes to either of the two previous questions, explain all such incidents, giving facts, dates, describing any action \_\_\_\_\_ you took and any resolution, on an attached signed sheet.
- What was your attendance record at your previous place of employment? \_\_\_\_\_
- Do you have a valid drivers license?  Yes  No

## Education

SCHOOL	LOCATION	DEGREES
High School		
Business School		
College / University		
Trade / Vocational School		
Extacurricular activities and honors received in school.		

## Professional Licenses, Registrations, and/or Certifications

List all states in which you are or have been licensed or certified and any national certifications. Attach additional pages if necessary.
Have you ever had any professional license or certification placed under investigation, disciplined, suspended, revoked or put on probation? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been denied a license or certification? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes to either above questions, explain in detail on an attached signed statement.

# Miscellaneous

Do you have any felony charges pending against you? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted or pled guilty or nolo contendere to a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes to either of the two proceeding questions, explain by giving the date, nature of the offense and circumstances in an attached, signed statement. Conviction of a crime will not necessarily disqualify an applicant from employment.
Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to perform the essential duties of the job for which you wish to be employed, with or without accomodation? <input type="checkbox"/> Yes <input type="checkbox"/> No
References: Give the name, address and telephone numbers of three references who are not related to you:  1. _____  2. _____  3. _____

# Certification

Should I receive a conditional offer of employment, I agree to submit to a physical medical examination, which may include a drug test prior to beginning employment. I authorize any physician or entity conducting such examination or test to release the results of the examination or test to Bay Bluffs.

I understand that, if I have a protected disability that effects my ability to perform the essential functions of the job I seek, I may ask Bay bluffs to make a reasonable accommodation for it. I must make my request in writing as soon as possible, and under Michigan law such notice must be given to Bay Bluffs within 182 days after the date I know or reasonably should know that accommodation is needed.

I understand that Bay Bluffs may request my authorization to secure criminal history information as part of its pre-employment screening process for the purpose of evaluating my qualifications for employment.

I have read and fully understand the questions on this application for employment. I have completely, truthfully, and accurately answered each an every question to the best of my knowledge. I understand that all inquiries on this application are subject to verification and authorize any schools that I have attended, licensing and certification boards and current and previous employers to release any requested information to Bay Bluffs. I also specifically waive written notice from any and all former employers regarding their disclosure to Bay Bluffs of any prior disciplinary action and waive any claim against Bay Bluffs and current or former employers arising from such investigation or disclosure. I understand that any misrepresentation of the information I have supplied or failed to supply can result in a rejection of this application or, if I have been hired, an immediate dismissal at the sole discretion of Bay Bluffs.

I understand and agree that in the absence of an express written contract or agreement to the contrary, signed by an authorized executive of Bay Bluffs and by me or my authorized representative, any employment I accept shall be for an indefinite term and may be terminated at any time with or without cause either by me or at the will and sole discretion of Bay Bluffs regardless of any contrary provisions in any other forms, manuals, handbooks or other documents. Similarly, such employment shall be at the wages, benefits, hours and conditions as Bay Bluffs may determine and change from time to time and I agree to abide by any rules, regulations, policies and procedures that may be established from time to time. I understand that no one, other than an authorized executive or Board of Directors of Bay Bluffs has any authority to enter into an agreement with me contrary to the provisions of this paragraph and that any such agreement must be in writing and signed by such authorized executive or it shall not be effective.

It is with full understanding and agreement with the provisions of this Certification that I will accept any employment offered to me.

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Signature of Applicant

Date