

LUTHERAN SERVICES CAROLINAS

APPLICATION FOR EMPLOYMENT

Trinity Village	Trinity Place	Trinity Oaks Rehab	Trinity Glen	Trinity Ridge	Trinity Elms
Trinity Oaks	Trinity View	Trinity Living	Trinity At Home	LSC Pharmacy	LSC Management Trinity Grove

APPLICATION MUST BE COMPLETED IN FULL

(PLEASE PRINT)

We consider applicants for all positions without regard to race, color, creed, religion, sex, national origin, age, marital status, disability or veteran status, or any other legally protected status.

DATE: _____

NAME _____

LAST
FIRST
MIDDLE

ADDRESS _____

NUMBER
STREET
CITY
STATE
ZIP CODE

TELEPHONE (_____) _____ STATE AGE IF UNDER 18 _____

POSITION APPLIED FOR _____ PAY RATE EXPECTED _____

WOULD YOU WORK: FULL TIME _____ PART TIME _____ DATE AVAILABLE FOR WORK: _____

SHIFT PREFERENCE: DAY ___ EVENING ___ NIGHT ___ OTHER _____

LIST DAYS/TIMES YOU ARE AVAILABLE TO WORK: _____

Have you filed an application here before? YES NO If yes, give date _____ Location _____
(See location listing above)

Have you ever been employed by LSC? YES NO If yes, give date _____ Location _____
(See location listing above)

Is any member of your family currently employed by LSC? YES NO
 If yes, give location and department _____

Are you eligible and authorized to legally work in the United States? YES NO
(Proof of eligibility and identity will be required upon employment.)

Do you have communicable TB (Tuberculosis)? YES NO

North Carolina law requires that criminal background checks be completed on all new employees. LSC uses the State Bureau of Investigation, the FBI, and a private agency to verify information supplied by applicants. An applicant who willfully supplies false information on employment application materials that is the basis for criminal background record checks is committing a misdemeanor crime. As required by law, LSC will report falsifications of this nature to the appropriate state agencies for prosecution.

Are you listed on the North Carolina Nurse Aide Registry? YES NO

Have you ever been convicted of, or has administrative action been taken against you for abusing, neglecting or mistreating individuals, misappropriating property, drug diversion, or fraud? YES NO: If yes, please explain: _____

Have you **ever** been convicted of a crime, including any felony, any misdemeanor or DUI? YES NO If yes, please list:
 Do you have any pending charges for any felony, any misdemeanor or DUI? YES NO If yes, please list:

<u>CRIME</u>	<u>DATE OF CONVICTION</u>	<u>CITY/STATE OF CONVICTION</u>	<u>PENALTY</u>

EMPLOYMENT HISTORY

Start with your present or last job and list each job you have held by date. You may include military service assignments and volunteer activities if you wish.

EMPLOYER:	PHONE:	DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS:				
JOB TITLE:	HOURLY RATE/SALARY			
	STARTING	FINAL		
SUPERVISOR:				
REASON FOR LEAVING:				
EMPLOYER:	PHONE:	DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS:				
JOB TITLE:	HOURLY RATE/SALARY			
	STARTING	FINAL		
SUPERVISOR:				
REASON FOR LEAVING:				
EMPLOYER:	PHONE:	DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS:				
JOB TITLE:	HOURLY RATE/SALARY			
	STARTING	FINAL		
SUPERVISOR:				
REASON FOR LEAVING:				

MAY WE CONTACT EMPLOYERS LISTED ABOVE? YES NO IF NOT, INDICATE WHICH ONE(S) YOU DO NOT WISH US TO CONTACT? _____

EDUCATION (ENCIRCLE LAST YEAR COMPLETED)

5	6	7	8	9	10	11	12	1	2	3	4	MORE
ELEMENTARY SCHOOL				HIGH SCHOOL				COLLEGE				

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience that relate to the job you are applying for:

PERSONAL REFERENCES

NAME	TELEPHONE	NO. YEARS KNOWN
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The facts set forth in my application are true and complete. I understand that, if employed, false statements on this application shall be considered sufficient cause for dismissal. I hereby authorize LSC to make any investigation of my personal and work history. I also authorize employers, schools or personal references named above to provide information concerning my employment, education, character, and qualifications.