

Bellingrath

Gardens and Home

12401 Bellingrath Gardens Road • Theodore, Alabama 36582
251.973.2217 • Fax 251.973.0540 • bellingrath.org • bellingrath@bellingrath.org

A PRE EMPLOYMENT DRUG SCREEN IS REQUIRED FOR EMPLOYMENT

Notice to Applicant: We are an equal opportunity employer and do not discriminate on the basis of an applicant's or employee's race, color, religion, sex, national origin, citizenship, age, physical or mental disability or any other characteristic.

Personal Information (please print)

Name: _____ (Last) (First) (MI)	Social Security: _____ - _____ - _____
Address: _____	
City: _____	State: _____ Zip: _____ Phone: () _____

Position Information (please print)

Position Applied For: _____
Department/Group: _____
Have you ever worked for this organization? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, date(s): _____
Prior Position(s): _____
Reason(s) for Leaving: _____

Education (please print) list from present to past

School / Institution	Major Area of Study	Degree or Number of Years

Achievements (please print)

PLEASE ANSWER EACH OF THE FOLLOWING QUESTIONS:

1. Are you currently under arrest for any crime which has yet to be adjudicated, pending trial?

Yes No

If yes, please state the circumstances _____

2. Have you ever committed a crime for which you were arrested or convicted?

Yes No

If yes, please explain _____

3. State the number of times you were absent from work during the last 12 months for reasons unrelated to a disability, your own serious health condition or to care for a child, spouse, parent or dependent or grandparent with a serious health condition. _____

4. State the number of times you were late arriving to work during the last 12 months for reasons unrelated to a disability, your own serious health condition or to care for a child, spouse, parent or dependent or grandparent with a serious health condition. _____

5. How many times during the last 24 months were you disciplined at work? _____

For what reason? _____

Was the discipline justified? Yes No

If no, please explain

6. Why do you want to work at Bellingrath Gardens and Home? _____

7. Are you over 18 years of age? Yes No (for insurance purposes only)

Employment History (please print) Please List Current First

Current: _____	Telephone: ____ (____) _____
Address: _____	From: _____
Position: _____	To: _____
Reason for leaving: _____	Pay Rate: _____

Previous: _____	Telephone: ____ (____) _____
Address: _____	From: _____
Position: _____	To: _____
Reason for leaving: _____	Pay Rate: _____

Previous: _____	Telephone: ____ (____) _____
Address: _____	From: _____
Position: _____	To: _____
Reason for leaving: _____	Pay Rate: _____

Previous: _____	Telephone: ____ (____) _____
Address: _____	From: _____
Position: _____	To: _____
Reason for leaving: _____	Pay Rate: _____

Previous: _____	Telephone: ____ (____) _____
Address: _____	From: _____
Position: _____	To: _____
Reason for leaving: _____	Pay Rate: _____

References (please print)

Name	Relationship to Applicant	Telephone	Years Known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Information (please print)

Name of friends and / or relatives employed by this organization: _____

Position held: _____

If you are eligible, are you interested in health insurance? Yes No

Emergency Contact (please print)

Name	Relationship to Applicant	Telephone
_____	_____	_____
(Last)	(First)	
Name	Relationship to Applicant	Telephone
_____	_____	_____
(Last)	(First)	

Acknowledgement (please read carefully)

I hereby certify that the information contained in this application form and in any attachments listed below (hereafter made a part of this application) is true and correct to the best of my knowledge and agree to have any of the statements checked by the organization unless I have indicated to the contrary. I authorize the references listed above to provide the company any and all information concerning my previous employment and any pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the company as well as from the use or disclosure of such information by the organization or any of its agents, employees or representatives. I understand that any misrepresentation, falsification or material omission of information on this application may result in my failure to receive an offer or, if I am hired, in my dismissal from employment.

Attachments: _____

_____ Applicant's Signature _____ Date