

**Kirkwood by the River
An Equal Opportunity Employer**

CONFIDENTIAL

**APPLICANTS FOR
EMPLOYMENT MAY BE
SUBJECT TO A TEST FOR
DRUGS AND ALCOHOL**

1. Name of Applicant (Last Name, First Name and Middle Name)					2. Date of Application			
3. Residence Address (Street & No., City, State and Zip Code)								
4. Home Telephone No. (If relative or friend's no., give name)				5. Social Security No.		6. Do you have a legal right to work in the United States? Yes ___ No ___		
7. Are you at least 18 years old? Yes ___ No ___				8. Position Applied For:				
9. Are you available to work: Full Time ___ Part Time ___ Shift Work ___ Weekend Work ___ Over Time ___								
10. Education (Please give record of education as called for below)								
Type of School	Name of School	Location	Month and Year From	To	Name of Principal or Dean	Were You Graduated?	Course or Degree	
High School								
College								
Special Training/ Adult Education								
If not graduated, why did you leave your last school?				GED Yes ___ No ___		Do you intend to return to school? Yes ___ No ___		
11. Employment:								
Month and Year From	To	Company or Employer (If not employed how and where your time was spent)	Name of Immediate Supervisor	Employer's Address	Kind of Business	Position Held	Reason for Leaving	Monthly Earnings
Do you have other job related skills, talents, or licenses not covered elsewhere?								
If employed, is your employer aware that you are contemplating changing employment? Yes ___ No ___				If employed, state your reason for wanting to leave present position.				
What prompted you to apply for this position?				If you are now employed, how much notice should you give before leaving?				
12. Do you have relatives who work at Kirkwood? (Give Relationship)								

13. Have you ever applied to or worked for this company before? Yes _____ No _____ If answered "Yes" when and where?					
14. References (not relatives or former employers):					
Name	Address	City	State	Zip	Phone Number
15. Have you ever been convicted of, plead no contest or guilty to a crime? Yes _____ No _____ If "Yes" give details: (i.e., Date, Place & Outcome)					
16. Have you been accused or participated in an investigation pertaining to an abuse issue? Yes _____ No _____			17. Remarks:		

Please Read Before Signing

I understand that this application is not an offer of employment and that by accepting my application Kirkwood by the River ("Kirkwood") does not guarantee that I will be offered a job. I also understand that if I am offered and accept a job, Kirkwood reserves and retains the right to make such changes in the terms and conditions of my employment, with or without notice, as Kirkwood determines to be necessary or appropriate.

If employed, I agree to conform to the rules of Kirkwood. I understand and agree that any future employment is not for any guaranteed length of time, and that employment is based on the consent of both Kirkwood and the individual employee, and that both Kirkwood and I have the freedom to terminate the employment relationship whenever either chooses to do so, and that no policy, procedure or practice of Kirkwood may in any way constitute or be construed as either a contract of employment between Kirkwood and me or a promise of employment. I understand that no one other than the President of Kirkwood has authority to make any other agreement. Any such agreement must be in writing.

I understand that if I am offered employment I will have to undergo a physical exam as required by the Alabama State Board of Health and at any time Kirkwood deems appropriate after I am hired. Such physical examinations may include drug screening tests to determine whether I have been or am using illegal drugs, controlled substances, or prescribed medications. I understand that both initial and continued employment are contingent upon the successful completion of such examinations, but successful completion does not guarantee initial or continues employment. I will inform Kirkwood prior to any physical examination of any prescription drugs that I am currently taking. I agree to submit to such physical examinations and the results released to appropriate Kirkwood officials.

I hereby (a) authorize inquiries seeking information and/or verification concerning my personal and employment history, and (b) release from all liability, damage and/or responsibility all persons, schools, hospitals, corporations, governmental agencies or other organizations furnishing information and/or documents, regarding my personal and employment history, and (c) authorize the release of any such information and/or documents, including law enforcement records.

I certify that all statements made by me on this application as well as in employment interviews are true and complete to the best of my knowledge and that I have withheld nothing. Moreover, I understand that any omission or misrepresentation of fact may result in refusal of employment or immediate dismissal when discovered.

I understand and agree that if employed by Kirkwood, I am responsible for complying with Kirkwood policies and procedures, including reporting any behavior which I think may violate Kirkwood policies prohibiting discrimination, harassment, or retaliation in employment.

I Have Read and Understand this Statement

Signature: _____

Date: _____

