

Application for Employment



Date: ___ / ___ / ___

Position applying for: _____ Merritt Academy Appletree First Steps

Personal Information:

First Name _____ Middle Initial _____ Last Name _____

Address: _____

City _____ State _____ Zip _____
 (Home Phone) _____ (Cell Phone) _____

Email: _____

Emergency Contact: _____

How did you learn about us/opening? _____

Have you reached your 18th birthday? Yes No

Employment Desired:

Full-time Part-time Summer On-Call

Days/Times available: _____

Start Date: ___ / ___ / ___ Salary desired: _____

Have you ever worked for an SSLEF school? Yes No

If yes, where and when? _____

Only U.S. Citizens or Aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment provide genuine documentation establishing your identity and eligibility to be legally employed in the United States? Yes No

It is the policy of SSLEF to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, expunged juvenile records, or pregnancy, and to afford equal opportunities to disabled veterans, veterans of the Vietnam era, and individuals with a disability, any and other characteristic protected by Federal, State or Local law.

Additional Information:

Do you speak a foreign language? No Yes If yes, what language(s)? _____

Please tell us about any special skills you have or any additional information about yourself that you would like us to know in considering you for a position. _____

Have you ever been convicted of any crime? No Yes If yes, please provide the date(s) and the offense(s). ("Yes" will not necessarily disqualify you from job.) _____

Education	School's Name	Years Attended	Year Graduated	Degree Recieved	Major
High School					
College					
Graduate Work					

Teaching Certification No Yes State _____ Date Issued _____ Level/Area _____

Employment History:

Employer's Name: _____

Address: _____

Phone: _____ Dates of Employment: _____ Position/Salary: _____

Name/Title/Phone of Supervisor: _____

Reason for leaving: _____

May we contact your present employer: Yes No

Employer's Name: _____

Address: _____

Phone: _____ Dates of Employment: _____ Position/Salary: _____

Name/Title/Phone of Supervisor: _____

Reason for leaving: _____

Employer's Name: _____

Address: _____

Phone: _____ Dates of Employment: _____ Position/Salary: _____

Name/Title/Phone of Supervisor: _____

Reason for leaving: _____

Employer's Name: _____

Address: _____

Phone: _____ Dates of Employment: _____ Position/Salary: _____

Name/Title/Phone of Supervisor: _____

Reason for leaving: _____

Please explain any gaps in employment: _____

Please attach resume or additional job history to this application.

Professional References:

Name: _____ Relationship: _____

Company: _____ Job title: _____

Years known: _____ Phone number: _____ Circle one
w c h Email: _____

Name: _____ Relationship: _____

Company: _____ Job title: _____

Years known: _____ Phone number: _____ Circle one
w c h Email: _____

Name: _____ Relationship: _____

Company: _____ Job title: _____

Years known: _____ Phone number: _____ Circle one
w c h Email: _____

I understand that if I am employed by Sunrise Senior Living Education Foundation (SSLEF), employment is "at will," which means the employment is not for a definite period and may be terminated either by myself or SSLEF, at the sole discretion of either, for any reason, at any time. I understand that no one at SSLEF has authority to make any different agreement except the Executive Director by formal agreement in writing signed by the Executive Director and the employee. I allow SSLEF to disclose information about my job performance to other employers.

I authorize full investigation of all statements in this application.

I understand that misrepresentation or omission of facts is cause for dismissal.

Signature _____

Date _____

While our desire is to be flexible with all our employees in scheduling, we reserve the right to alter work schedules in order to meet our business needs and provide the highest quality of care for all students. This application will remain on file for thirty (30) days. If you have not been employed within thirty (30) days of your application, you must reapply for a position with SSLEF.