



12151 DALE STREET, STANTON, CALIFORNIA, 90680  
 (714) 530-9100  
[www.RowntreeGardens.org](http://www.RowntreeGardens.org)

## EMPLOYMENT APPLICATION

Date: \_\_\_\_\_

<b>Personal Information</b>					
Last Name:		First Name:		Middle Name:	
Address:					
City:		State:		Zip:	
Home Phone:		Cell Phone:			
E-mail address:					
Have you ever been known by any other name which might identify you on employment, education or other records? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, please provide the name(s):					
How did you learn about this job? <input type="checkbox"/> Newspaper <input type="checkbox"/> Employee referral <input type="checkbox"/> Walk-in <div style="text-align: center;"><input type="checkbox"/> Internet <input type="checkbox"/> Rowntree Gardens Website <input type="checkbox"/> Other</div>					
If employee referral, please give the name of the employee:					
Do you have any relatives who are current or past employees for Rowntree Gardens? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If so, please give name(s) of relative(s):					
<b>Position(s) Desired</b>					
DIETARY/KITCHEN: <input type="checkbox"/> Server <input type="checkbox"/> Trayline <input type="checkbox"/> Dishwasher <input type="checkbox"/> Cook <input type="checkbox"/> Other					
SKILLED NURSING UNIT: <input type="checkbox"/> C.N.A <input type="checkbox"/> L.V.N. <input type="checkbox"/> R.N.A. <input type="checkbox"/> R.N. <input type="checkbox"/> Other					
ASSISTED LIVING <input type="checkbox"/> Caregiver <input type="checkbox"/> C.N.A. <input type="checkbox"/> L.V.N. <input type="checkbox"/> Other					
MEMORY CARE: <input type="checkbox"/> Caregiver <input type="checkbox"/> C.N.A. <input type="checkbox"/> L.V.N. <input type="checkbox"/> Other					
FACILITY SERVICES: <input type="checkbox"/> Laundry <input type="checkbox"/> Maintenance <input type="checkbox"/> Housekeeping					
OTHER: <input type="checkbox"/> Office <input type="checkbox"/> Activities <input type="checkbox"/> Other					
What shifts are you available and willing to work? (Check at least one): <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> On Call <input type="checkbox"/> Temporary <input type="checkbox"/> Nights <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Weekends					
Please list any time restrictions in your schedule:					
Have you been employed by Rowntree Gardens before? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, please list position and dates of employment:					
<b>Licenses/Certifications</b>					
List all that apply to the position(s) desired.					
License Title: _____			Expiration Date: _____		
License Title: _____			Expiration Date: _____		
License Title: _____			Expiration Date: _____		
Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Educational Background			
Name, City, State		Diploma/Certificate	Area of Study
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Technical/ Other Training		<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Special Skills and Qualifications**

Summarize special job-related skills, qualifications, training, apprenticeship(s), honors, professional trade, business and/or civic offices held.

(You may exclude memberships which would reveal sex, sexual orientation, race, religion, national origin, age, ancestry, disability or other protected status.)

Do you have the legal right to work in the United States?    ☐ Yes    ☐ No

Have you ever been convicted of a criminal offense?    ☐ Yes    ☐ No

If yes, please describe the nature of the offense and the date and jurisdiction where conviction(s) occurred:

(You may omit convictions for marijuana-related offenses that are more than two years old. Also, a criminal conviction is not an automatic disqualification for all jobs, but it may affect your suitability for some positions.)

**Personal References**

Please list below three personal references who not related to you, are over the age of 18, who are familiar with your job performance and/or character and who have known you for at least one year.

Name	Email Address	Phone Number

### Employment Experience

Start with your most recent job. (Do not go back more than ten years.). Note: It is important that you list **all** previous jobs you have held. If you need additional space to write/type, please attach a separate page.

Employer	Dates Employed		Principle Job Duties
Job Title	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Supervisor	Begin	End	
Reason for Leaving			
If currently employed, may we contact your employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employer	Dates Employed		Principle Job Duties
Job Title	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Supervisor	Begin	End	

Employer	Dates Employed		Principle Job Duties
Job Title	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Supervisor	Begin	End	

Employer	Dates Employed		Principle Job Duties
Job Title	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
Supervisor	Begin	End	

Rowntree Gardens is an equal opportunity employer and complies with applicable laws against discrimination because of race, color, age, religion, national origin, sex, sexual orientation, disability (which does not prevent performance of the essential functions of the job), veteran status or any other basis protected by local, state or federal law. Rowntree Gardens has adopted a no-smoking policy which requires that all employees refrain from smoking or using tobacco products during working time and/or while on the premises except in the designated smoking areas. Rowntree Gardens is a drug free workplace.

**Applicant's Statement**

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. In the event of my employment, I understand that later discovery by Rowntree Gardens of false or misleading information given on my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.

☐ Yes ☐ No

I understand and agree that all employment with Rowntree Gardens is "at will", meaning that if I am hired, either Rowntree Gardens, or I may terminate my employment at any time, with or without cause, and with or without notice.

☐ Yes ☐ No

**Disclosure to Employment Applicant Regarding Procurement of a Consumer Report**

In connection with your application for employment, Rowntree Gardens may obtain and use a "consumer report" and/or "investigative consumer report" from a "consumer reporting agency." These terms are defined in the Fair Credit Reporting Act ("FCRA"), which applies to you. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, we will provide you with a copy of the report and a description in writing of your rights under the law.

I authorize investigation of all statement contained in this application for employment as may be deemed necessary in arriving at an employment decision. I authorize Rowntree Gardens to communicate with current/previous employers. Therefore, I consent to and authorize all persons and institutions mentioned on my application to give information about me to Rowntree Gardens relative to my possible future employment. I do hereby release all current/previous employers, schools attended, and Quaker Gardens from all liability in regard to the final outcome(s) due to the transmission of reference information. ☐ Yes ☐ No

I authorize Rowntree Gardens to investigate and obtain information from law enforcement and other government agencies, military authorities and private companies concerning my conduct including traffic (driving record) and criminal violations.

☐ Yes ☐ No

I authorize Rowntree Gardens to produce a criminal background report as part of the process for considering my candidacy as an employee. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, Rowntree Gardens will provide you with a copy of the criminal background report and a description in the writing of your rights under the law. The FCRA giver you specific rights in dealing with consumer reporting agencies. You will find these rights in the "Summary of your Rights Under the Provisions of California Civil Code Section 1786.22." Under the FCRA, I understand that I will be advised and given the name of the consumer reporting agency for more information. ☐ Yes ☐ No

I authorize Rowntree Gardens and/or its agents to obtain a criminal background report as part of the process for considering my candidacy as an employee from the California Department of Social Services (DSS) and/or State of California Department of Health Services (DHS). ☐ Yes ☐ No If we receive any adverse action as a result of receiving the report, we will provide you with a copy of it regardless of whether you waived your right to receive it.

Rowntree Gardens is a Drug Free Workplace. All positions of employment shall be offered contingent upon passing a drug test. I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer to Rowntree Gardens. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released by my previous employer, is limited to the following DOT regulated items: alcohol tests with a result of 0.04 or higher, verified positive drug tests, refusals to be tested, other violations of DOT agency drug and alcohol testing regulations, information obtained from previous employers of a drug and alcohol rule violation and any documentation of a completion of the return-to-duty process following a rule violation.

☐ Yes ☐ No

This application for employment shall be considered active for a period of time not to exceed 180 days. I have read and understand the preceding statements. ☐ Yes ☐ No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date