



Application for Employment

The Life Center of Davidson County, Inc.
601 West Center Street, Lexington, NC 27292

Please Print Clearly

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of The Life Center Management Team.

Position(s) Applied For: _____ **Date of Application:** _____

Name: _____
Last First Middle

Address: _____
Street City State Zip

Social Security Number: _____ **Date of Birth:** _____

Cell Phone Number: _____ **Email Address:** _____

If you are under 18 and it is required, can you furnish a work permit? ☐ Yes ☐ No ☐ Not Applicable

If no, please explain: _____

Have you ever been employed here? ☐ Yes ☐ No

Are you legally eligible for work in this country? ☐ Yes ☐ No

Date available for work? _____ / _____ / _____

Type of employment desired? ☐ Full-Time ☐ Part-Time ☐ Temporary

Are you able to meet the attendance requirement of the position? ☐ Yes ☐ No

Have you been convicted of a crime in the last 7 years? ☐ Yes ☐ No

If yes, please explain: _____

Conviction will not necessarily be a bar to employment. The specifics of the conviction will be considered in relation to the position for which you are applying.

If driving is essential to your employment:

Driver's License Number: _____ **State:** _____

Do you have a current certification in CPR and/or First Aid? ☐ Yes ☐ No

Employment History – Beginning with most recent job:

JOB 1	Employer: _____	From: _____	To: _____
	Telephone: _____	Job Title: _____	
	Address: _____	City: _____	State: _____ Zip: _____
	Immediate Supervisor and Title: _____		
	Summarize the nature of work performed and job responsibilities: _____		
	Reason for leaving: _____		
	Hourly Rate/Salary: Starting Pay \$ _____ per _____ Final Pay \$ _____ per _____		

JOB 2	Employer: _____ From: _____ To: _____
	Telephone: _____ Job Title: _____
	Address: _____ City: _____ State: _____ Zip: _____
	Immediate Supervisor and Title: _____
	Summarize the nature of work performed and job responsibilities: _____
	Reason for leaving: _____
Hourly Rate/Salary: Starting Pay \$ _____ per _____ Final Pay \$ _____ per _____	

JOB 3	Employer: _____ From: _____ To: _____
	Telephone: _____ Job Title: _____
	Address: _____ City: _____ State: _____ Zip: _____
	Immediate Supervisor and Title: _____
	Summarize the nature of work performed and job responsibilities: _____
	Reason for leaving: _____
Hourly Rate/Salary: Starting Pay \$ _____ per _____ Final Pay \$ _____ per _____	

Skills and Qualifications:

Summarize any training skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Educational Background - if job related:

	NAME & LOCATION	YEARS COMPLETED	DID YOU GRADUATE?	COURSE OF STUDY
High School:	_____			
College:	_____			
Other:	_____			Major Degree

References: You must list at least 3 references.

NAME	RELATION	TELEPHONE NUMBER	YEARS KNOWN

Statement of Understanding

If I am employed, I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions, and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law. This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer other than an authorized officer has the authority to make any assurances to the contrary. I further understand that such assurance must be in writing and signed by an authorized officer.

I understand it is the company's policy not to refuse to hire a qualified individual with a disability because that person's need for reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorizations.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant: _____ Date: _____