



YAKIMA HEART CENTER®

EMPLOYMENT APPLICATION

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected class.

(Please print)

Position(s) applied for: _____ Date of Application _____

Last Name First Name Middle Name

Address City State Zip Code

Telephone Number(s) Cell Phone

Emergency Contact

Emergency Telephone Number(s)

Best time to contact you at home is : ____ am pm

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever been convicted of a crime? Yes No

(Being convicted of a crime does not necessarily exclude you from employment) If yes, when, where and what was the disposition of the case?

Have you ever been employed with us before? Yes No

If yes, please give date: _____

Do any or your friends or relatives, other than spouse, work here? Yes No

If yes, whom? _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status (Proof of citizenship or immigration status will be required upon employment)

Yes No

Date available for work _____ What is your desired salary range? _____

Are you available to work _____ Full-time
 _____ Part time (please indicate Mornings Afternoon Evenings)
 _____ Temporary (please indicate dates available _____)

Can you perform the essential functions of the position for which you are applying? YES [] NO [] If no, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question)

Can you travel if a job requires it? Yes No

EMPLOYMENT HISTORY

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. Employer	Dates Employed	Work Performed
Address	From To	
Telephone Number	Hourly Rate/Salary Starting Final	
Job Title Supervisor Name		
Reason for leaving		

2. Employer	Dates Employed	Work Performed
Address	From To	
Telephone Number	Hourly Rate/Salary Starting Final	
Job Title Supervisor Name		
Reason for leaving		

3. Employer	Dates Employed	Work Performed
Address	From To	
Telephone Number	Hourly Rate/Salary Starting Final	
Job Title Supervisor Name		
Reason for leaving		

4. Employer	Dates Employed	Work Performed
Address	From To	
Telephone Number	Hourly Rate/Salary Starting Final	
Job Title Supervisor Name		
Reason for leaving		

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship and skills that may qualify you for this position.

SPECIALIZED SKILLS

___ Terminal	_____ Spreadsheet	_____ Certifications
___ PC/MAC	_____ Word Processing	_____ Licenses/#
___ Typewriter	_____ Copier/FAX	
WPM _____		

REFERENCES

Please provide the names and phone numbers of three references who know your work.

1. _____
2. _____
3. _____

SMOKING

Do you smoke? Yes No

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize you to communicate with persons listed as references, former employers and any others with whom you desire to check. I agree to hold such persons harmless with respect to any information they may give about me.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means the employee may resign at any time and the employer may discharge the employee at any time for any reason with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in my not being considered for employment or if not discovered by the company until after becoming employed, is grounds for, and may result in, my immediate termination. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

We are an Equal Opportunity Employer