



Serenity

Mental Health Services

Application for Employment or Contract Work

Name: _____ Aliases: _____

Phone: _____ Birthdate: _____

Address: _____ City/State Zip: _____

Position applied for: _____

Are you a U.S. citizen? _____ If not, do you have legal rights to work in the U.S.? _____

Driver's License #: _____

Place of Birth: _____

EDUCATION

Highest level of education completed: _____

Name of last school attended/year: _____

List training or coursework related to the job for which you are applying: _____

WORK EXPERIENCE

List present or most recent employer first (list only experience pertaining to this position). This section does not replace a resume submission.

Employer: _____ **May we Contact?** _____

Address: _____ **Date Employed:** _____

Supv. Name: _____ **Reason for leaving:** _____

Job Title: _____

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Address: _____ **Date Employed:** _____

Supv. Name: _____ **Reason for leaving:** _____

Job Title: _____

EMERGENCY NOTIFICATION

Name: _____ Relationship: _____

Address: _____ Tele: _____ H

_____ Tele: _____ W

WORK REFERENCES

List persons not related to you who can comment on your work qualifications.

NAME

ADDRESS

PHONE

1. _____

RELATIONSHIP: _____ YRS. ACQUAINTED: _____

2. _____

RELATIONSHIP: _____ YRS. ACQUAINTED: _____

The above information is correct and complete to the best of my knowledge.

I understand my signature below authorizes a criminal background and driving record study, employment and reference verification, and review of workers comp claims and sex offender registry.

Applicant Signature

Date

*Please attach the following with your application (a background check will be conducted):

- Resume and Cover Letter
- Copy of Driver's License
- Copy of Social Security Card

Upon hire, the following will be needed:

- Copy of Degree
- Copy of malpractice insurance (if applicable)
- Copy of Vehicle Insurance