



## ATTENTION APPLICANTS...

To be considered for this position, you must be able to answer “yes” to all of the following:

1. Have a high school diploma or GED
2. Have a valid drivers license and carry liability insurance
3. Be at least 18 years old.

### INFORMATION ABOUT THIS JOB

- We are looking for caring and compassionate persons with flexible work availability.
  - We cannot guarantee any set number of hours or any set schedule due to the nature of the business.
  - Must be willing to work with the following services:
  - Are you willing to provide services to a client with a pet?
- |                             |  |   |
|-----------------------------|--|---|
| ⇒ Companionship             | ⇒ Housekeeping (Dust, Vacuum)                  | ⇒ Medication Reminders & Administration |
| ⇒ Meal Preparation          | ⇒ Personal Care (Bathing, Dressing, Toileting) | ⇒ Errands/Shipping                      |
| ⇒ Activities (Games/Crafts) |  |   |
- Previous experience is not necessary, but you need to be willing to attend trainings and staff meetings.
  - All employees must clear a negative Mantoux test.

### RETURN COMPLETED APPLICATION TO:

*Human Resources*

*1125 Oakview Drive*

*Dilworth, MN 56529*

**Phone: 218-477-7254**

**Fax: 218-477-7255**

**E-mail: [elaine@serenityassistedliving.com](mailto:elaine@serenityassistedliving.com)**



# EMPLOYMENT APPLICATION

## An Equal Opportunity Employer

Serenity Assisted Living is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

### APPLICANT INFORMATION (PLEASE PRINT)

FIRST NAME: \_\_\_\_\_ MIDDLE: \_\_\_\_\_ LAST: \_\_\_\_\_

HAVE YOU EVER USED ANOTHER NAME?  YES  NO

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE : \_\_\_\_\_ ALT. PHONE: \_\_\_\_\_

SOCIAL SECURITY NUMBER (LAST FOUR DIGITS): \_\_\_\_\_ Are you over 18 years of age?  YES  NO

E-MAIL: \_\_\_\_\_

DESIRED PAY RANGE: \_\_\_\_\_  FULL TIME  PART TIME  EITHER

### CHECK WHICH DAYS YOU ARE AVAILABLE TO WORK:

SUNDAY  MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY

### CHECK WHICH SHIFTS YOU ARE AVAILABLE TO WORK:

| AM Shifts                                   | PM Shifts                                    | NOC Shifts                                   |
|---|--|--|
| <input type="checkbox"/> 6:30 am to 2:30 pm | <input type="checkbox"/> 2:00 pm to 9:30 pm  | <input type="checkbox"/> 10:00 pm to 7:00 am |
| <input type="checkbox"/> 7:00 am to 3:00 pm | <input type="checkbox"/> 3:00 pm to 10:00 pm |  |
|   | <input type="checkbox"/> 5:00 pm to 9:00 pm  |  |

If hired, on what date can you start working? \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Serenity requires that you work every other weekend. Can you work on the weekends?  YES  NO

## PERSONAL INFORMATION

Have you ever applied to work for Serenity before?

YES  
 NO

Do you have any friends, relatives or acquaintances working for Serenity or living at Serenity?

YES  
 NO

If hired, would you have transportation to/from work?

YES  
 NO

If hired, are you willing to submit to a Mantoux testing before you start your employment with Serenity?

YES  
 NO

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Examples: Lift anywhere from 25-100 pounds, light house-keeping, cooking, baking, medication administration, driving a motor vehicle, reading, writing?

YES  
 NO

**If no, describe the functions that cannot be performed:** \_\_\_\_\_

**NOTE: Serenity Assisted Living complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.**

Can you, after employment, submit verification of your legal right to work in the U.S.?

YES  
 NO

## EDUCATIONAL BACKGROUND

| HIGH SCHOOL   | COLLEGE   | OTHER TRAINING, VOCATIONAL OR MILITARY PROGRAMS |
|---|---|---|
| NAME:   | NAME:   |   |
| CITY & STATE:   | CITY & STATE:   |   |
| HIGHEST GRADE COMPLETED:  | YEARS COMPLETED:  |   |
| Did you graduate? <input type="checkbox"/> YES<br><input type="checkbox"/> NO | Did you graduate? <input type="checkbox"/> YES<br><input type="checkbox"/> NO |   |

## WORK EXPERIENCE

*(List the jobs held in the last 5 years, with the most recent first. Use extra paper if needed.)*

MAY WE CONTACT YOUR PREVIOUS EMPLOYER?  YES  NO

STARTING WAGE:

NAME OF YOUR EMPLOYER:

ENDING WAGE:

ADDRESS:

PHONE:

SUPERVISOR:

DATES WORKED: FROM TO

JOB TITLE:

REASON FOR LEAVING:

LIST GENERAL DUTIES PERFORMED:

MAY WE CONTACT YOUR PREVIOUS EMPLOYER?  YES  NO

STARTING WAGE:

NAME OF YOUR EMPLOYER:

ENDING WAGE:

ADDRESS:

PHONE:

SUPERVISOR:

DATES WORKED: FROM TO

JOB TITLE:

REASON FOR LEAVING:

LIST GENERAL DUTIES PERFORMED:

MAY WE CONTACT YOUR PREVIOUS EMPLOYER?  YES  NO

STARTING WAGE:

NAME OF YOUR EMPLOYER:

ENDING WAGE:

ADDRESS:

PHONE:

SUPERVISOR:

DATES WORKED: FROM TO

JOB TITLE:

REASON FOR LEAVING:

LIST GENERAL DUTIES PERFORMED:

## EXPERIENCE, SKILLS, QUALIFICATIONS & TALENTS

Do you have any other JOB EXPERIENCE that would help you with this job? If yes, please explain:

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Summarize any specialized trainings, skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions for the positions in which you are applying:

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Please explain why you think you would be good at the job in which you are applying for:

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# APPLICATION ACKNOWLEDGEMENTS

| <i>Please read carefully, ask questions about anything you don't understand.</i>  | <b>YES</b>   | <b>NO</b> |
|---|--------------|-----------|
| <p><b>At-Will Employment</b><br/>Serenity Assisted Living maintains an At-Will Employment arrangement with all employees. I understand that if hired, the employment will not be permanent; instead the employment will be At-Will meaning that either party may terminate this agreement at any time, with or without cause, at-will.</p>  |              |           |
| <p><b>Dependent Care</b><br/>If hired, I understand due to the nature of the business, (taking care of dependent people) I will have dependent people, and my co-workers relying on me to come to work when scheduled and on time, unless I am prevented to do so because of illness or emergency. In the event I am not able to come to work, I will immediately make a reasonable attempt to find my own replacement as well as notify the administration. I further understand, that although this is employment relationship is At-Will that I am not allowed to walk away from my job, and leave the residents unsupervised at anytime. This can be considered a vulnerable adult violation and appropriate action will ensue.</p> |              |           |
| <p><b>Physical and Mental Ability</b><br/>I understand that due to the nature of the business, (taking care of dependent people) I must always have the physical and mental ability to do the job. If I am disabled, or become disabled, I understand that I can request the company to make reasonable accommodations to assist me, however, the company may refuse if it compromises resident care, or causes an undue hardship on the company.</p>   |              |           |
| <p><b>Visiting After Termination</b><br/>If hired, I understand that this facility reserves the right to refuse to allow me to come back to visit at the facility after termination of employment.</p>  |              |           |
| <p><b>Drug &amp; Alcohol Policy</b><br/>I understand that prior to my acceptance of employment, and if hired, during my employment, I may be tested for the use of illegal drugs, and if found positive for use, my relationship with Serenity Assisted Living will be immediately terminated. I further understand that if hired, and I am found under the influence of drugs or alcohol while at work, I may be immediately terminated.</p>   |              |           |
| <p><b>Non-Discrimination Policy</b><br/>I understand this company does not discriminate against applicants because of race, creed, color, religion, gender, or sexual preference, and that hiring is based on qualifications, personal characteristics, background check and interview.</p>   |              |           |
| <p><b>Conditional Hire</b><br/>I understand my employment status with Serenity Assisted Living, if hired, is conditional until my criminal background check clears, I pass medication administration training and testing, or discovery of a criminal conviction.</p>   |              |           |
| <p><b>Information Verification</b><br/>I hereby give my permission for Serenity Assisted Living to contact my previous employers, schools and other contacts I have listed here and hereby release this company, and listed contacts from any liability arising from such communication of information. I understand that falsification of this information is just cause to refuse hiring, and falsifications discovered later, can be grounds for immediate termination.</p>  |              |           |
| <b>Applicant's Signature:</b>   | <b>Date:</b> |           |

**THANK YOU FOR YOUR INTEREST IN OUR COMPANY.**