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PO Box 909  
Moore, ID 83255  
Phone: 208-588-2700  
Fax: 208-588-2701  
www.valleyvista.org

# Employment Application

Date:

[Print Form](#)

**This application is only current for ninety (90) days, at which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Position(s) Applied for:** \_\_\_\_\_  Full-Time  Part-Time

**Date available to work:** \_\_\_\_\_ **Shift Preference:**  Days  Evenings  Nights

Are you able to work weekends and holidays?  Yes  No

Are you able to perform the essential functions of the position which you are applying for?  Yes  No

Are you over 18 years of age?  Yes  No Are you eligible to work in the United States?  Yes  No

\*Federal Law requires proof of identity and employment authorization for all new employees

Have you EVER worked for Valley Vista Care?  Yes  No

If Yes, list name(s) under which you worked and dates of employment: \_\_\_\_\_

## Education

Type of School	Name of School and Location	# Years Completed	Major or Degree
High School			
College / University			
College / University			
Other Training/Education			

## License and/or Professional Memberships

Type of License(s) or Membership(s)	Number	State	Expiration Date

## Criminal History

\*A conviction may not automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered.

1. Have you EVER been arrested or received a citation for any misdemeanor or felony offense?  Yes  No

Explanation: \_\_\_\_\_

2. Have you EVER plead guilty or been convicted of a crime as an adult or a juvenile?  Yes  No

Explanation: \_\_\_\_\_

Continue on the next page

3. Do you have **ANY** criminal charges currently against you?  Yes  No

Explanation: \_\_\_\_\_

4. Have you **EVER** been the subject of a child protection or adult abuse investigation?  Yes  No

Explanation: \_\_\_\_\_

**Work History** (Please list your last 3 employers, starting with the most current)

<b>1.</b>	<table border="1"><tr><td><b>Name of Employer</b></td><td></td></tr><tr><td><b>Address</b></td><td></td></tr><tr><td><b>Phone Number</b></td><td></td></tr><tr><td><b>Job Title</b></td><td></td></tr><tr><td><b>Supervisor's Name</b></td><td></td></tr></table>	<b>Name of Employer</b>		<b>Address</b>		<b>Phone Number</b>		<b>Job Title</b>		<b>Supervisor's Name</b>		<table border="1"><tr><td><b>Dates of employment:</b></td></tr><tr><td><b>From:</b> _____ <b>To:</b> _____</td></tr><tr><td><b>Reason for Leaving (be specific):</b></td></tr><tr><td>_____</td></tr></table>	<b>Dates of employment:</b>	<b>From:</b> _____ <b>To:</b> _____	<b>Reason for Leaving (be specific):</b>	_____
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Valley Vista Care may contact my current/previous employer(s) for references?  Yes  No

*I authorize my previous and present employers to release requested information regarding job performance issues to Valley Vista Care. I release Valley Vista Care, my previous employer(s), and my present employer from any and all liability in exchanging information.*

Please use this space to explain any gaps in employment and/or list any other experiences related to the position you are applying for:

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**I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without material omissions, and understand that, if employed, omissions and/or false statements on this application or during any interviews may result in dismissal. I understand and acknowledge that, if hired, my employment is for no definite period and either Valley Vista Care or I may terminate our relationship at will at any time, without notice or reason, and that this employment application does not constitute an employment contract.**

**I understand that any job offer that may be extended to me may be contingent upon the successful completion of a drug test and background check.**

I have had an opportunity to have my questions about this statement's content and intent answered and understand its terms.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_