

EXPERIENCE: List below all present and past employment, beginning with your most recent employer

Employer _____ Starting Salary _____ per hour or week
Address _____ Ending Salary _____ per hour or week
Job Title _____ Reason for leaving Quit Discharge Retired
Dates Employed _____ to _____ Laid off
For Job Reference, Call _____ at _____
 Please do not contact this employer. Why? _____

Employer _____ Starting Salary _____ per hour or week
Address _____ Ending Salary _____ per hour or week
Job Title _____ Reason for leaving Quit Discharge Retired
Dates Employed _____ to _____ Laid off
For Job Reference, Call _____ at _____
 Please do not contact this employer. Why? _____

Employer _____ Starting Salary _____ per hour or week
Address _____ Ending Salary _____ per hour or week
Job Title _____ Reason for leaving Quit Discharge Retired
Dates Employed _____ to _____ Laid off
For Job Reference, Call _____ at _____
 Please do not contact this employer. Why? _____

Employer _____ Starting Salary _____ per hour or week
Address _____ Ending Salary _____ per hour or week
Job Title _____ Reason for leaving Quit Discharge Retired
Dates Employed _____ to _____ Laid off
For Job Reference, Call _____ at _____
 Please do not contact this employer. Why? _____

In the following space, please describe any special knowledge, skills, or abilities that will bring added value if you are employed here.

Please list the name, address and contact information of three references who can attest to your knowledge, skill and ability to perform the work for which you are applying. We are seeking business related references, not personal references.

Name _____ Phone # _____ Occupation _____

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CONDITIONS OF EMPLOYMENT

I. The facts as stated on this application are true and correct. I understand that, if employed, false statements on this application may cause my immediate dismissal.

II. I authorize whatever background and personal reports needed to verify that the information I have supplied is true and accurate and to determine my fitness for this job and hold harmless those who have the responsibility to develop such a report. A copy of this authorization is as valid as the original.

III. I understand that I may be required to work overtime as a condition of being employed and attend quarterly mandatory staff meetings as scheduled.

IV. In consideration of my employment, I agree to conform to the rules and regulations for employees. I understand I am an employee at-will, and that this application is not a contract of employment with Day Spring Community Living and that my employment and compensation can be terminated, with or without cause, at any time, at the option of either Day Spring Community Living or me. I understand that no representative of Day Spring Community Living, has any authority to enter into any verbal agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and that no document, policy or practice of Day Spring Community Living, may change the foregoing unless it is expressly titled "Employment Agreement" and signed by both myself and the Chief Executive Officer of Day Spring Community Living.

V. I understand that I will be required to submit to a pre-employment, for fitness and/or substance abuse, if not prohibited by law.

VI. Upon separation of employment, I authorize Day Spring Community Living to withhold from my final pay check any monies owed by me (if not prohibited by law) for equipment, loans, benefits advanced that I have not earned, materials, or other assets in my possession not promptly returned or repaid as agreed.

VII. As a condition of employment, I accept that any complaint or conflict that cannot be resolved internally may be referred to Alternative Dispute Resolution, unless prohibited by law, before any other legal action is taken.

DATE _____ **SIGNATURE** _____