



Ennis Court

A SANCTUARY OF PEACE, COMFORT AND FAITH

Application for Employment

_____	_____	_____
Date	Position Applying For	Shift Desired
_____	_____	_____
Name		Social Security Number
_____	_____	_____
Address	City	State Zip Code
_____	_____	_____
Telephone Number	Cell/Pager Number	Nurse Aide Registry or Nurses License Number

Email

Are you legally eligible to work in the United States? Yes _____ No _____
 Proof of employment eligibility will be required if you are hired.

Have you ever been convicted of a felony or drug related crime (for example, but not limited to: Assault, Theft, Drug Use or Sale, a Sex Related Crime)?
 Yes _____ No _____
 If yes, please explain: _____

If you are to have direct hands-on care with residents, you are required by the State of Ohio to have a BOCCI background check.

Previous Employment History

_____	_____	_____
Most Recent Employer	Address/Phone Number	Supervisor's Name
_____	_____	_____
Employment Dates	Position	Ending Wage
_____	_____	_____
Reason for Leaving		

_____	_____	_____
Previous Employer	Address/Phone Number	Supervisor's Name
_____	_____	_____
Employment Dates	Position	Ending Wage
_____	_____	_____
Reason for Leaving		

Education

_____	_____	_____
High School or GED	City / State	Graduate / Years Completed
_____	_____	_____
College or University	City / State	Graduate / Years Completed
_____	_____	_____
Professional / Technical School	City / State	Graduate / Years Completed

ENNISCOURT NURSING CARE

13315 Detroit Ave., Lakewood, OH 44107
 Phone 216-226-3858 • Fax 216-226-8344 • caring@enniscourt.com

ENNISCOURT ASSISTED LIVING

13323 Detroit Ave., Lakewood, OH 44107
 Phone 216-226-3103 • Fax 216-226-8344 • caring@enniscourt.com

References

Please provide the Name, Address, and Phone Number of three persons not related to you who can provide information about your suitability for a position with EnnisCourt.

_____ Name	_____ Address	_____ Telephone Number
_____ Name	_____ Address	_____ Telephone Number
_____ Name	_____ Address	_____ Telephone Number

EnnisCourt Employment Certification

EnnisCourt bases its hiring and discharge decision without regard to an Applicant's race, religion, creed, national origin, sex, marital status, pregnancy status, or sexual preference.

Please Read Carefully Before Signing

In completing this application for employment, I understand that EnnisCourt may conduct or have conducted an investigation into my background. By my signature below, I authorize all persons, schools, companies, consumer reporting agencies, and other organizations to supply all information requested by EnnisCourt in association with such investigation including, but not limited to, information regarding my educational background, work history, personal character, and all other information, personal or otherwise. By my signature below, I hereby release and hold harmless all persons, companies, schools, agencies, and other parties from all liabilities and damages whatsoever in association with any background investigation performed by or on behalf of EnnisCourt.

I understand that any false statements of fact upon this application will be considered just cause for my dismissal from employment with EnnisCourt. Should I become an employee, I understand that EnnisCourt may require me to supply appropriate supporting documentation concerning the information I have provided on this application.

I understand that, if hired, my employment with EnnisCourt is for no definite period and may be terminated at any time for any reason without prior notice. Just as I may resign my employment at any time, for any reason, EnnisCourt will have the full right and authority to terminate my employment within its sole discretion. I understand and agree that the terms and conditions of my employment, if hired, can only be varied from this at-will arrangement through written documentation from an officer of EnnisCourt specifically authorized to make such contracts. I understand, agree, and acknowledge that any reliance on any statements by any representative of EnnisCourt contrary to this at-will arrangement is unreasonable and may not form any basis for my reliance thereon.

I also understand and agree that EnnisCourt has the right to modify, amend, or terminate policies, procedures, rules, and benefit plans at its discretion and/or manner consistent with requirements imposed by law.

I acknowledge and agree that, should I receive an initial offer of employment, such offer is preliminary and contingent upon my completion of a medical examination and drug and alcohol test upon request by EnnisCourt. I understand that my refusal to undergo either will preclude me from obtaining and continuing employment with EnnisCourt. Further, I hereby authorize and agree that all medical information obtained in association with my pre-placement examination shall be released from all appropriate medical personnel to EnnisCourt and release and hold harmless all persons, companies, and other entities conducting such examinations from all liability(ies) and damages whatsoever in association with such examination.

I understand that this application for employment shall be considered active for a period of time not to exceed six months. I understand that, if I wish to be considered for employment beyond this time, I should contact EnnisCourt to inquire as to whether applications are being accepted for positions at such time.

I understand and accept the conditions in this statement, and agree to abide by the policies and procedures of EnnisCourt as established by the board of directors and/or the administrator.

Signature of Applicant

Date

For EnnisCourt's Use Only Not To Be Completed By Applicant

Interviewed By

Date

Position Hired For

Shift

Date Hired

Starting Date

Starting Pay Rate

Last Work Date

Reason For Leaving Employment