



APPLICATION FOR EMPLOYMENT

Chartwell Midwest Wisconsin (CMW) is an equal opportunity employer. Applicants are considered for all positions without regard to race, color, religion, national origin, non-job related disability, Vietnam era and disabled veteran status, sexual orientation, age or sex, except where permitted as a bonafide occupational qualification, or marital status.

PERSONAL INFORMATION

Date _____

Name _____
LAST FIRST MIDDLE

Current Address _____
STREET CITY STATE ZIP

Phone No. _____

EMPLOYMENT DESIRED

Full-time Part time Per Diem Limited Term

Position _____ Date you can start _____ Salary Desired _____

What days/hours are you available? _____

Are you employed now? _____ If so, may we inquire of your current employer? _____

Have you ever applied to this company before? _____ Where? _____ When? _____

Have you ever been employed by this company before? _____ Where? _____ When? _____

How did you hear about Chartwell? _____

EDUCATION

	High School	College/University	Graduate/Professional	Other (inc. military school)
School Name and City, State				
Years Completed: (circle)	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				

List any other name used while attending any of the above institutions _____

Do you have any special skills or licenses that directly relate to the job for which you are applying? (Please list type, state, and expiration date, if applicable). _____

Answer the following questions only if driving will be required as a function of the job for which you are applying?

Do you have a valid driver's license? _____ State _____

EXPERIENCE

List any other name used while employed in any of the following positions and/or for which employer: _____

From _____ To _____	Employer _____ Supervisor _____ Address _____ Telephone _____ Salary _____ per _____ Position/Job duties _____ Reason for leaving _____
From _____ To _____	Employer _____ Supervisor _____ Address _____ Telephone _____ Salary _____ per _____ Position/Job duties _____ Reason for leaving _____
From _____ To _____	Employer _____ Supervisor _____ Address _____ Telephone _____ Salary _____ per _____ Position/Job duties _____ Reason for leaving _____

References: Please include prior supervisors/managers that we may contact. State the capacity in which this reference has known you).

Name _____

Address _____ Phone Number _____

Name _____

Address _____ Phone Number _____

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I understand and agree that any misrepresentation or omission of facts in my application may be justification for refusal to hire or termination of employment.

I further understand that an investigation report may be made as to my character and general reputation. I authorize all past employers, schools, persons and organizations having relevant information to provide CMW, for its use in deciding whether or not to offer me employment. I hereby release all parties from all liability in responding to inquiries in connection with my application.

I understand and agree that this application is not intended to be a contract of employment, and that my employment and compensation may terminate with or without cause, and with or without notice, at any time at the option of either CMW, or myself.

In signing this form, I understand all of the questions and statements in this application.

_____ Date

_____ Signature of Applicant