



## Marquis Place Application ✕

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status. Marquis Place is an equal opportunity employer. Please complete this application in full. Please note that incomplete applications may not be reviewed. Applications must be completed before an offer of employment can be made.

### Personal Information

First Name *	Last Name *	Phone	Email
<input type="text"/>	<input type="text"/>	<input type="text" value="(888)888-8888"/>	<input type="text"/>
Address 1		Address 2	
<input type="text"/>		<input type="text"/>	
City	Country	State	Zip Code
<input type="text"/>	<input type="text" value="United States"/>	<input type="text"/>	<input type="text"/>
Date Available to Start *	Desired Salary *		
<input type="text" value="MM/DD/YYYY"/>	<input type="text" value="MM/DD/YYYY"/>		

Are you authorized to work in the US? \*

- Yes
- No

Are you 18 years or older? \*

- Yes
- No

Have you previously worked for this company? \*

- Yes
- No

Select the day(s) you are able to work (you may choose more than one): \*

- 12-hour Day Shift
- 12-hour Night Shift
- PRN (as needed)
- Other

### Professional License/Certification

Do you have a current, valid State Certification and/or License? (ex. CNA, CMA, LPN, RN) \*

- Yes
- No

### Referral Information

How did you hear about Marquis Place? \*

- Online - Job search, Indeed, company website, etc.
- Word of mouth (family, friend, co-worker)
- Other



### Employment History

Start with your current or most recent employer, please be as detailed as possible. At least one previous employer is required.

Employer *	Phone Number *	
<input type="text"/>	<input type="text" value="(888)888-8888"/>	
Address *		
<input type="text"/>		
City *	State *	Zip *
<input type="text"/>	<input type="text" value="v"/>	<input type="text"/>
Job Title *	Start Date *	End Date *
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text" value="MM/DD/YYYY"/>
May we contact this employer? *		
<input type="radio"/> Yes		
<input type="radio"/> No		
Reason for Leaving *		
<input type="text"/>		

Employer	Phone Number	
<input type="text"/>	<input type="text" value="(888)888-8888"/>	
Address		
<input type="text"/>		
City	State	Zip
<input type="text"/>	<input type="text" value="v"/>	<input type="text"/>
Job Title	Start Date	End Date
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text" value="MM/DD/YYYY"/>
May we contact this employer?		
<input type="radio"/> Yes		
<input type="radio"/> No		
Reason for Leaving		
<input type="text"/>		

Your text goes here

### Education

High School	City
<input type="text"/>	<input type="text"/>
State	Graduation Year
<input type="text" value="v"/>	<input type="text"/>



College	Graduation Date
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>
Degree	Major
<input type="text"/>	<input type="text"/>
City	State
<input type="text"/>	<input type="text" value="v"/>

Graduate School	Graduation Date
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>
Degree	Major
<input type="text"/>	<input type="text"/>
City	State
<input type="text"/>	<input type="text" value="v"/>

Other School	Graduation Date
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>
Degree	Major
<input type="text"/>	<input type="text"/>
City	State
<input type="text"/>	<input type="text" value="v"/>

### Military Service

Branch	From	To
<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text" value="MM/DD/YYYY"/>
Type of Discharge	Rank at Discharge	
<input type="text"/>	<input type="text"/>	

### Specialized Training/Skills/Organizations

Please list any specialized training or skills you have that you consider relevant to the job in which you are applying for. You may also list any professional groups or organizations you belong to.

Professional Organization(s)/Group(s):	Specialized Training/Skill(s):
<input type="text"/>	<input type="text"/>

Do you have a current CPR certification? \*

Yes

No

### References

Please list three professional or community references. Do not include family or friends. Failure to provide correct information on your references can cause a delay in the hiring process. Please provide the CORRECT email address and phone number for your references.



Do you have a current CPR certification? \*

- Yes
- No

### References

Please list three professional or community references. Do not include family or friends. Failure to provide correct information on your references can cause a delay in the hiring process. Please provide the CORRECT email address and phone number for your references.

Name	Phone	Email
<input type="text"/>	<input type="text" value="(888)888-8888"/>	<input type="text"/>
Position	Company	
<input type="text"/>	<input type="text"/>	

Name	Phone	Email
<input type="text"/>	<input type="text" value="(888)888-8888"/>	<input type="text"/>
Position	Company	
<input type="text"/>	<input type="text"/>	

### Disclaimer

I understand: That completing this application does not constitute an offer of employment and that my application may be rejected for any reason. That giving false or misleading information on this form or in an interview is grounds for denial or immediate termination of employment. That I may be required to complete a medical history form and may be required to be examined by a medical professional designated by Marquis Place. That if I sustain any injury or illness in the employment of Marquis Place, I agree that Marquis Place shall be entitled to receive full and complete reports and records covering any medical or related exams, and I authorize any and all such doctors, medical examiners, and hospitals to give full and complete reports and records covering any medical or related exams, and I authorize any and all such doctors, medical examiners, and hospitals to give full and complete reports and records covering such examinations, condition, care and treatment related to or resulting from the alleged illness or injury.

I understand and agree to ...

### Authorization to Release Information

If I am given a conditional offer of employment, I authorize Marquis Place to conduct a complete investigation, including but not limited to: my past employment history, medical history, scholastic records, criminal records, abuse records, motor vehicle driving records, workers' compensation history and rely on such information sources. I authorize all persons and organizations to release any information concerning my background and hereby release all persons and organizations from liability for any damage whatsoever for issuing this information. I acknowledge that a fax or photo copy shall be as valid as the original. By signing, I certify that I have not been convicted of any offense that would preclude working in a nursing facility. I also certify that I am not excluded from participation in federal healthcare programs. Furthermore, I understand that I will be subject to a search of the OIG List of Excluded Individuals, and that a comprehensive criminal background screening will be completed by a third party organization acting on behalf of Marquis Place. If the findings of that background screening result in a refusal to hire, I will be notified in writing and may request a copy of the findings from the third party organization. I understand that the use of illegal drugs is prohibited during employment. If employment policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and/or during employment. I understand that this employment application and any other employee-related documents are not contracts of employment; and that any individual who is hired may voluntarily leave employment upon proper notice, and may be terminated by the employer at any time for any reason. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand and agree to ...