



Victory Therapy Center is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability as provided in the Americans with Disabilities Act and Fair Labor Standards Act.

Drug screening and Criminal Background check are required of all applicants before an offer of employment has been made.

Position(s) Applied For		Date of Application
How Did You Learn About Us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend <input type="checkbox"/> Relative	<input type="checkbox"/> Walk-in <input type="checkbox"/> Other _____

Last Name	First Name	Middle Name	
Address	City	State	Zip
Email Address			
Telephone Number			
<input type="checkbox"/> Home _____			
<input type="checkbox"/> Cell _____			

Are you legally eligible for employment (Proof of eligibility will be required upon offer of employment)? YES NO

Have you ever been convicted of a misdemeanor or felony (excluding minor traffic violations) including driving under the influence of alcohol or drugs? YES NO

Note: Answering "yes" does not automatically disqualify you for employment. The nature and timing of any conviction and the relevance to the job for which you have applied will be considered. "If you answered yes, please give details on a separate sheet of paper and attach to application".

Can you work overtime if required by the job for which you are applying? YES NO

Can you travel if a job required it? YES NO

Do you have reasonable accommodations for transportation if required by the job for which you are applying? YES NO

If NO, please explain _____

Do you have a valid driver license? YES NO

EMPLOYMENT DESIRED

Are you seeking Full-time Part-time Temporary or summer employment

What is your desired salary range or hourly rate of pay? \$

Date available to start?

Have you ever applied to work or volunteer for our company before? YES NO

Have you ever worked/volunteered for our company before? YES NO

If you answer to either of the above questions is YES, state **when** and **where** you applied and/or worked/volunteered.

Are you now, or do you expect to be, working in any other business or job? YES NO

Are there any days or hours you would be unable/unwilling to work? YES NO

If YES, please specify those days or hours you would be unable/unwilling to work

EDUCATION

Name	Address/Location	Graduate?	Courses Studied
High School		<input type="checkbox"/> YES <input type="checkbox"/> NO	Diploma:
College		<input type="checkbox"/> YES <input type="checkbox"/> NO	Diploma:
Trade School		<input type="checkbox"/> Yes <input type="checkbox"/> NO	Diploma:

Are you planning to pursue further studies? YES NO

If so, when, where and what courses? _____

List any scholastic honors, offices held and activities involved in during high school and college _____

List and describe any other School or Specialized Training _____

List any professional licenses or certifications that you hold: _____

Has your professional license or certification been suspended or been under investigation? *If yes give details on a separate sheet attached to the application.* _____

MILITARY

Have you ever served in the military?

YES NO

Service Branch

Date Entered

Date Separated

Final Rank

CAPABILITY/RELIABILITY

Would you be willing and able to perform all of the tasks required by the job you are applying for?

YES NO

If not, explain which tasks _____

Would you abide by the safety rules of this company?

YES NO

Have you ever been disciplined for violating company safety rules or regulations?

YES NO

If YES, please explain _____

Would you be willing and able to report to work on time every day and on a regular and consistent basis?

YES NO

If NO, please explain _____

WORK HISTORY

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disability or other protected status.

Employer			Work Performed	
Telephone Number(s)	Dates Employed From	To		
Address				
Job Title	Supervisor	Hourly Rate/Salary	Final	
Reason for Leaving				
Employer			Work Performed	
Telephone Number(s)	Dates Employed From	To		
Address				
Job Title	Supervisor	Hourly Rate/Salary	Final	
Reason for Leaving				
Employer			Work Performed	
Telephone Number(s)	Dates Employed From	To		
Address				
Job Title	Supervisor	Hourly Rate/Salary	Final	
Reason for Leaving				
Employer			Work Performed	
Telephone Number(s)	Dates Employed From	To		
Address				
Job Title	Supervisor	Hourly Rate/Salary	Final	
Reason for Leaving				

SUPPLEMENTAL EMPLOYMENT INFORMATION

If you worked in any or your previous positions under another name, please give that name(s) below: (For reference checking purposes)

Name**Company**

Are you presently employed?

YES NO

If YES, may we contact your present employer?

YES NO

Have you ever been fired, or asked to resign, from a job?

YES NO

If YES, please explain _____

Have you ever been disciplined or received verbal or written warnings for absenteeism or tardiness?

YES NO

If YES, please explain _____

SPECIAL SKILLS

Do you type?

YES NO Words per minute _____

Have you had any computer or word processing experience or training?

YES NO

Use this space below to describe why you are interested in working for our company and to list those skills and abilities which you feel particularly qualify you for a position with us. If you need more space, please continue on a separate sheet.

Indicate any foreign languages you can speak, read, and /or write			
	Fluent	Good	Fair
Speak			
Read			
Write			

REFERENCES

Give three professional references who are not relatives or former employers.

Name**Address****Phone****Occupation**

Name	Address	Phone	Occupation

AFFIDAVIT

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application or during any interviews may be grounds for my immediate discharge.

I hereby authorize Victory Therapy Center to contact any company or individual it deems appropriate in investigate my employment history, character and qualifications and I give my full complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

Signature

Date