



CAAN Academy of Nursing

4747 Lincoln Mall Drive, Suite 420
Matteson, IL 60443

PLEASE PRINT OR TYPE
EXCEPT SIGNATURE

Application for Employment

Date _____					
Name _____					
Last	First	Middle	Maiden		
Present address _____					
Number	Street	City	State	Zip Code	
How long at present address _____		Social Security No.: _____			
Telephone Number () _____		If under 18, please list age _____			
Email: _____					
Position applying for _____			Days/hours available to work:		
Desired Salary (be specific) _____			No Pref. _____ Thur _____		
How many hours can you work weekly? _____			Mon _____ Fri _____		
Employment desired: FULL-TIME ONLY _____			Tue _____ Sat _____		
PART-TIME ONLY _____ FULL OR PART-TIME _____			Wed _____ Sun _____		
When are you available to begin work? _____			Can you work nights? _____		
Emergency Contact Information:					
Name: _____			Relationship: _____		
First Last					
Phone Number: _____					

EDUCATION	NAME OF SCHOOL	LOCATION (Complete Mailing Address)	Date and/or Years Completed	Major/Degree
High School				
College				
Business or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME?

Yes _____

No _____

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

DO YOU HAVE A VALID DRIVER'S LICENSE?

Yes _____

No _____

Driver's License Number _____

State of Issue _____

Expiration Date _____

What is your means of transportation to work? _____

Is there any physical disability that would prevent you from performing fully the duties of the job for which you are applying?

Yes _____

No _____

MILITARY**HAVE YOU EVER BEEN IN THE ARMED FORCES?**

Yes _____

No _____

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?

Yes _____

No _____

Specialty _____ Date Entered: _____ Date Discharged: _____

WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give company name. Attach additional sheets if necessary.

Employer: _____	Supervisor	Employment Dates	Salary
Address: _____		From: _____	Start: _____
City, State, Zip Code: _____		To: _____	Final: _____
Telephone Number: (____) _____	Last job title: _____		
Reason for leaving (be specific): _____			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while at this company. _____			

Employer: _____	Supervisor	Employment Dates	Salary
Address: _____		From: _____	Start: _____
City, State, Zip Code: _____		To: _____	Final: _____
Telephone Number: (____) _____	Last job title: _____		
Reason for leaving (be specific): _____			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while at this company. _____			



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PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by CAAN Academy of Nursing (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/General Manager of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relationship with the Company is terminable at will for any reason by either party.

Signature of applicant _____

Date: _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application and for your interest in our business.