

Employment Application

Wesley Village

2800 Loy Lake Rd.

Denison, TX 75020

We are an Equal Opportunity Employer. All qualified applicants are considered regardless of race, religion, color, age, sex, marital status, nationality, veteran status, or non-disqualifying disability.

Date: _____

Position applied for: _____

Social Security Number: _____

Full Legal Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Education: Highest Grade Completed: _____

Name of College or University: _____ Degree: _____

Name of College or University: _____ Degree: _____

Name of College or University: _____ Degree: _____

Certifications: _____

Proficiencies/Skills: _____

Reference 1: Name: _____

Relationship: _____ Phone Number: _____

Address: _____ City, State, Zip: _____

Reference 2: Name: _____

Relationship: _____ Phone Number: _____

Address: _____ City, State, Zip: _____

Work Experience: List jobs beginning with your present or most recent employer

Employer: _____

Job Title: _____

Address: _____

Phone: _____

Duties: _____

Tenure Years: _____ Hire Date: _____ Leave Date: _____

Starting Salary: _____ Ending Salary: _____

Reason for Leaving: _____

Employer: _____

Job Title: _____

Address: _____

Phone: _____

Duties: _____

Tenure Years: _____ Hire Date: _____ Leave Date: _____

Starting Salary: _____ Ending Salary: _____

Reason for Leaving: _____

Employer: _____

Job Title: _____

Address: _____

Phone: _____

Duties: _____

Tenure Years: _____ Hire Date: _____ Leave Date: _____

Starting Salary: _____ Ending Salary: _____

Reason for Leaving: _____

Employer: _____

Job Title: _____

Address: _____

Phone: _____

Duties: _____

Tenure Years: _____ Hire Date: _____ Leave Date: _____

Starting Salary: _____ Ending Salary: _____

Reason for Leaving: _____

Miscellaneous:

- A. Check which shift you will accept: Day Evening Night
 Rotating Weekends Specify shift hours _____
- B. Check which job status you would accept: Full-time Part-time
- C. Check which employment status you would accept: Salaried (benefits)
 Hourly Full-time Part-time
- D. Are you willing to accept employment which requires you to travel? Yes No
If yes: during day only Occasionally overnight Frequently overnight
- E. For purposes of compliance with the Immigration Reform and Control Act, are you legally eligible for employment in the United States: Yes No
Under the Immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you become employed with us.
- F. Are you willing to provide your own transportation, if necessary, for your employment?
 Yes No
- G. Have you ever been convicted for any violation(s) of law, including moving traffic violations: Yes No If yes, please provide the description of the offense:
Statute or ordinance (if known): _____
Date of Charge: _____ Date of Conviction: _____
County, City, State: _____
For additional convictions, use plain paper. Include all information listed above.

Where did you hear about Wesley Village? _____

When will you be available to start work? (No date necessary, if you are available as soon as you give two weeks notice.) Available date: _____

Certification:

I hereby certify that all entries on both sides and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in Wesley Village. I understand that all information on this application is subject to verification and I consent to criminal history background checks. I also consent to references, former employers, and educational institutions listed being contacted regarding this application. I further authorize the Commonwealth to rely upon and use, as it sees fit, any information received from such contacts. Information contained on this application may be disseminated to other agencies, non-governmental organizations or systems on a need-to-know basis for good cause shown as determined by the agency head or designee.

Date: _____ Signature: _____

**Wesley Village
Criminal History Check Application**

Name: (Last, First, Middle) _____

Other Names Used: (Maiden, Married, etc.) _____

Race/Ethnicity: Black White Hispanic Oriental Other

If other, what race: _____

Sex: Male Female

Date of Birth: _____

Social Security Number: _____

Driver's License Number: _____

Have you lived in any other state within the last three years? Yes No

If yes, where? _____

Dates of any out of state residences: _____

Position: Board Member Staff Volunteer

The undersigned acknowledges and agree to clearance by the Texas Department of Public Safety or any other agencies as deemed appropriate by Wesley Village.

I certify I am the individual as aforementioned in this application, and I understand falsification of any information given will invalidate my employment with Wesley Village.

I hereby give permission to Wesley Village to inquire about my qualifications and/or character.

I understand this reference check may be made by telephone, or in writing, and will include past and present employers, volunteer organizations, and personal references.

Signature: _____ Date: _____

Wesley Village must comply with the provisions of Chapter 250 of the Health and Safety Code (relating to Criminal History Checks or Employee and Applicants for Employment in Certain Facilities Serving the Elderly with Disabilities). Before a facility hires an employee, the facility must search the Employee Misconduct Registry established under ~253.007, Health and Safety Code, and the Texas Department of Human Services Nurse Aide Registry, to determine whether the individual is designated in either registry as having abused, neglected, or exploited a resident or a consumer of a facility. Any person listed on either registry will not be employed.



Assisted Living Facility Background Disclosure Statement for Applicants for Employment

Section I – Facility Information

Instructions: Facilities must complete Section 1 of this disclosure statement and provide it to any applicant who applies for employment at the facility or incorporate the language provided in Section 2 into their facility application for employment. If an applicant for employment indicates on this disclosure statement or on the facility application for employment that they have lived in another state within the past five years, the facility must conduct a name-based criminal history check in each state in which the applicant previously resided within the 5-year period.

Facility Name	License No.	Area Code and Phone No.
Address (Street, City, State and ZIP Code)		
Manager	Date Disclosure Statement Completed	

Section II – Applicant Information

Instructions: Complete section, sign and return to facility manager.

Applicant Name	Applicant Area Code and Phone No.	Applicant Date of Birth (optional)
Applicant Address (Street, City, State and ZIP Code)		Date Disclosure Statement Completed

I have been convicted of an offense described in Texas Health and Safety Code Section 250.006: Yes No

I have lived in a state other than Texas within the past five years of the date of completion of this form: Yes No

If yes, list of states applicant has lived in other than Texas within the past five years:

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Signature of Applicant _____ Date _____