

Education

	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	LAST YEAR COMPLETED	DID YOU GRADUATE?	DIPLOMA OR DEGREE
High School			1 2 3 4	<input type="radio"/> Yes <input type="radio"/> No	
College or University			1 2 3 4	<input type="radio"/> Yes <input type="radio"/> No	
Other (Specify)			1 2 3 4	<input type="radio"/> Yes <input type="radio"/> No	
Other (Specify)			1 2 3 4	<input type="radio"/> Yes <input type="radio"/> No	

Please give one **personal** reference and one **professional/business** reference that we may contact.

Personal

Name _____ Address _____

Telephone number _____ Relationship _____

Business

Name _____ Address _____

Telephone number _____ Position _____

Record of Previous Employment or Attach a Resumé

Name and Address of Company			
Type of Business			
Describe the work performed			
Name of Supervisor			Telephone
Dates of Employment	From Mo./Yr.		Starting wage
	To Mo./Yr.		Ending wage
Reason for Leaving			

Name and Address of Company			
Type of Business			
Describe the work performed			
Name of Supervisor			Telephone
Dates of Employment	From Mo./Yr.		Starting wage
	To Mo./Yr.		Ending wage
Reason for Leaving			

Name and Address of Company			
Type of Business			
Describe the work performed			
Name of Supervisor			Telephone
Dates of Employment	From Mo./Yr.		Starting wage
	To Mo./Yr.		Ending wage
Reason for Leaving			

Availability

Part time ____ Please indicate the minimum and maximum of hours desired per week _____

Full time ____

	Morning	Afternoon/Evening	Overnight
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

*Every other weekend is required.

Do you have current training and/or certifications? Check all that apply.

CNA _____ Medication Management _____
 CPR _____ Dependent Adult Abuse _____
 CPI _____ Driver's License class D3 _____

Answers to the following questions are optional:

Are you over the age of eighteen? _____ If no, hire is subject to verification of minimum legal employment age.

Date of birth _____ Sex _____ Marital status _____

Number of dependents (including yourself) _____

Are you a citizen of the United States? _____

Please ask any questions you may have or make any additional comments in the space that follows: _____

Affirmative Action/Equal Opportunity:

It is a fundamental policy of Arch, Inc., to provide equal opportunities regardless of race, creed, color, sex, sexual orientation, national origin, age, or handicapped status, in all educational employment and contracting activities.

I attest that the information on this application is true and accurate.

(signature)

(date)