

Veteran of the U.S. Military service? Yes No If Yes, Branch _____

Indicate language you speak, read, and/or write. _____

	Fluent	Good	Fair
Speak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Read	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Write	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

List professional, trade, business or civic activities and offices held.
(You may exclude those that indicate race, color, religion, sex or national origin):

Give name, address and telephone number of three references who are not related to you and are not previous employers.

Answer the following questions if you are applying for a professional position

Are you licensed/certified for the job applied for? _____ Yes _____ No

Name of license/certification _____

Issuing State _____

License/Certificate Number _____

Has your license/certification ever been revoked or suspended? _____ Yes _____ No

If yes, state reason(s), date of revocation or suspension and date of reinstatement _____

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld and information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the company, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

_____ I understand that nothing contained in the application, or conveyed during any interview that may be granted or during my employment, if hired, is intended to create an employment contract between the company and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

_____ I understand that employment at Hospice of Yuma is "at will," both for the employee and the Hospice. Either the employee or Hospice of Yuma may terminate the relationship at any time, with or without cause.

Date: _____

Applicant's Signature _____