



# Employment Application

Ann's Heart  
 148 Church Street, 2nd Floor  
 Phoenixville, PA 19460  
[www.AnnsHeart.org](http://www.AnnsHeart.org)

## CONTACT INFORMATION

LAST NAME	FIRST NAME, MIDDLE INITIAL
STREET ADDRESS	CITY, STATE AND ZIP CODE
HOME PHONE	MOBILE PHONE
E-MAIL ADDRESS	HAVE YOU EVER APPLIED FOR EMPLOYMENT WITH ANN'S HEART? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WHEN?

## EMPLOYMENT INFORMATION

DATE OF APPLICATION	HOW WERE YOU REFERRED TO ANN'S HEART? IF THROUGH AN EMPLOYEE, PROVIDE NAME:
POSITION DESIRED	DAYS AND HOURS AVAILABLE
SALARY EXPECTED	IF HIRED, ON WHAT DATE CAN YOU START?
ARE YOU WILLING TO TRAVEL? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU WILLING TO WORK OVERNIGHT/WEEKENDS? <input type="checkbox"/> YES <input type="checkbox"/> NO
ARE YOU ELIGIBLE TO WORK IN THE USA <input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PROVIDE DETAILS:

## EDUCATION, TRAINING AND SKILLS

HIGH SCHOOL/VOCATIONAL SCHOOL/COLLEGE NAME, CITY AND STATE	DATES ATTENDED	COURSES OR MAJOR STUDIED	DEGREE EARNED OR YEARS COMPLETED

LIST COMPUTER SKILLS

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LIST RELEVANT TRAINING

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## EMPLOYMENT HISTORY (List chronologically with CURRENT employment first.)

ARE YOU CURRENTLY EMPLOYED?  YES  NO

IF YES, MAY WE CONTACT YOUR PRESENT EMPLOYER?  YES  NO

NAME OF EMPLOYER (1)	FROM	TO
STREET ADDRESS	CITY AND STATE	PHONE
YOUR JOB TITLE	SUPERVISOR NAME/TITLE	
PLEASE DESCRIBE BOTH YOUR POSITION AND YOUR RESPONSIBILITIES		STARTING SALARY
		ENDING SALARY
REASON FOR LEAVING	ARE YOU ELIGIBLE FOR RE-HIRE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PLEASE EXPLAIN	
NAME OF EMPLOYER (2)	FROM	TO
STREET ADDRESS	CITY AND STATE	PHONE
YOUR JOB TITLE	SUPERVISOR NAME/TITLE	
PLEASE DESCRIBE BOTH YOUR POSITION AND YOUR RESPONSIBILITIES		STARTING SALARY
		ENDING SALARY
REASON FOR LEAVING	ARE YOU ELIGIBLE FOR RE-HIRE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PLEASE EXPLAIN	
NAME OF EMPLOYER (3)	FROM	TO
STREET ADDRESS	CITY AND STATE	PHONE
YOUR JOB TITLE	SUPERVISOR NAME/TITLE	
PLEASE DESCRIBE BOTH YOUR POSITION AND YOUR RESPONSIBILITIES		STARTING SALARY
		ENDING SALARY
REASON FOR LEAVING	ARE YOU ELIGIBLE FOR RE-HIRE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, PLEASE EXPLAIN	

AMONG THE JOBS LISTED, WHICH ONE DID YOU LIKE THE BEST? GIVE DETAILS - BE SPECIFIC?

LIST ADDITIONAL SKILLS, TRAINING, QUALIFICATIONS, AND WORK EXPERIENCE RELEVANT TO THE POSITION YOU ARE APPLYING FOR

**3 PROFESSIONAL REFERENCES REQUIRED** - provide at least 1 prior supervisor from either a business or academic setting, with knowledge of your professional performance OR abilities within the last 5 years.

REFERENCE NAME (1)	TITLE AND EMPLOYER	RELATIONSHIP
YEARS KNOWN	E-MAIL	PHONE
REFERENCE NAME (2)	TITLE AND EMPLOYER	RELATIONSHIP
YEARS KNOWN	E-MAIL	PHONE
REFERENCE NAME (3)	TITLE AND EMPLOYER	RELATIONSHIP
YEARS KNOWN	E-MAIL	PHONE

ADDITIONAL INFORMATION:

PLEASE READ THE FOLLOWING CAREFULLY AND PRINT YOUR NAME, SIGN AND DATE

I understand that completing this application for employment at Ann's Heart does not guarantee an interview.

By my signature placed below, I promise that I have personally completed this application. I declare under penalty of perjury that the information provided in this employment application (and the accompanying resume, if applicable) is true and complete, and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I understand that any job offer is conditional, based on the satisfactory review of my qualification including any and all background or drug screening which may be required.

I understand that, if hired, I may not hold other employment or engage in other activities that create a conflict of interest with my position at Ann's Heart unless I have been given permission in writing by the President of the Board of Directors.

I agree to immediately notify Ann's Heart if I should be convicted of a crime while my application is pending or during my employment.

I voluntarily and knowingly authorize any present or past employer or supervisor, educational institution and other persons to give records or information they may have concerning my criminal history, educational history, employment history (including character, earnings, and reasons for termination), or any other information requested by Ann's Heart deemed pertinent to my employment.

I understand and agree that if Ann's Heart employs me, in consideration of my employment, my employment will be at-will, for no definite or determinable period of time. I can be terminated at any time, for any reason or for no reason at all, with or without prior notice, at the option of Ann's Heart or Me.

PRINT NAME:

SIGNATURE:

DATE:

**<< ANN'S HEART USE ONLY >>**

INTERVIEW DATE(1)	INTERVIEW DATE (2)	REFERENCE CHECK DATE
START DATE	STARTING SALARY	PROBATION PERIOD
COMMENTS		