



Employment Application

Today's Date (Month/Day/Year):	Position Applied For:	Branch:	Social Security Number:
--------------------------------	-----------------------	---------	-------------------------

PERSONAL			
Full Name (Last, First, Initial):		Email Address:	
Address:		Home Telephone:	Work Telephone:
City:	State:	Zip Code:	Other Telephone:
Have you ever been convicted, pleaded guilty or no contest to a felony or a misdemeanor? Yes No		If yes, give dates & details:	
Have you had any transit moving violations or DUI's within the past 5 years? Yes No		If yes, give dates & details:	
Have you ever worked for Options before? Yes No	If yes, when?		How were you referred to Options:
Ever had friends or relatives work at Options? Yes No	If yes, who & when?		Date Available to Start:
Are you a citizen of the US? Yes No	If not, can you legally work in the US? Yes No	Date of Birth (mm/dd/yy):	Means of transportation to work:
Do you have a Driver License? Yes No	State Issued & Expiration Date:	Do you own a vehicle? Yes No	If yes, make & year:

SKILLS			
Special skills or qualifications: Computer Payroll Sales Office Equipment Management Filing Administrative Clerical Accounting Collections Other:	Software:	Languages:	
		English	Speak Read Write
		_____	Speak Read Write
		_____	Speak Read Write
Other special skills or qualifications:			

EDUCATION					
	Name & Location of School	Course of Study	Graduated?	Degree	Year
High School			Yes No		
Undergraduate College			Yes No		
Graduate or Professional			Yes No		
Other (please specify)			Yes No		
Seminars, classes or other education not listed above which may help qualify you for this position:					

Employment History

Please attach a copy of your resume to this application and provide any information not included in your resume. Start with your most recent employer. Account for any periods of unemployment or self-employment.

May we contact your present employer? Yes No

Employer:	Start Date:	End Date:	Supervisor:
City/State:	Starting Salary:	Ending Salary:	Telephone:
Reason(s) for leaving:		Most significant accomplishments:	
Employer:	Start Date:	End Date:	Supervisor:
City/State:	Starting Salary:	Ending Salary:	Telephone:
Reason(s) for leaving:		Most significant accomplishments:	
Employer:	Start Date:	End Date:	Supervisor:
City/State:	Starting Salary:	Ending Salary:	Telephone:
Reason(s) for leaving:		Most significant accomplishments:	
Employer:	Start Date:	End Date:	Supervisor:
City/State:	Starting Salary:	Ending Salary:	Telephone:
Reason(s) for leaving:		Most significant accomplishments:	

- Options for Senior America Corp.(OSA) is committed to the principles of equal employment opportunity and complies with all Federal, State and local laws. We desire to maintain a work environment free of discrimination due to race, religion, color, national origin, physical or mental disability, age as protected by Federal, State or local laws.
- OSA will make reasonable efforts to accommodate physical or mental limitations of an otherwise qualified candidate.
- OSA will not tolerate any unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination.
- If offered a position, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to this test will disqualify you from employment. Negative test results are required as a condition of employment.
- A criminal record will not automatically disqualify you and will be considered only as it relates to the job.

I certify that my answers are true and complete. I understand that any omission or misstatement on this application or during interview(s), may result in the rejection of this application, and termination if I am employed, regardless of the time elapsed. Such termination will be without notice and may forfeit applicant from any accrued vacation and any other accumulated benefits.

I authorize Options for Senior America to make inquiries of my personal, employment, educational, financial and other matters necessary to make an employment decision. I hereby release employers, schools, and individuals from any and all liability arising from these inquiries.

Applicant's Signature

Date