



4605 Werley's Corner Road - New Tripoli, PA 18066 - Ph: 610.298.3300

Application for Employment

Completing this application is your first step towards joining a dynamic workforce dedicated to human service.

This application is a private document,
it will be held in a confidential manner.

Information in this application must be true and accurate.

Instructions for Completing Application

Before Applying

Gather all your information needed. This includes:

- ✓ Social
- ✓ Security Number
- ✓ Driver's License
- ✓ Professional License

Any other information, which might be required.

Develop a list of your former employers, their phone numbers, addresses and supervisors name.

Develop a list of you educational achievements, including name of school, location & years graduated.

Application Tips

- ✓ Type or print clearly in ink.
- ✓ Provide ALL requested information.
- ✓ Emphasize your experience/education that relates directly to the requirements on the job announcement. Summarize other experience.
- ✓ Start with your most recent experience and work backward.
- ✓ Submit application.
- ✓ Legible photocopies may be submitted for other positions but must contain an *original* signature and current date.

Now what?

You can expect to be notified of your application results in about one week

If offered a position, you must:

- ✓ Obtain CPR/First Aid certification, at your own expense, prior to employment
- ✓ Take the online direct care workers comp test (if applicable) at:

www.services.dpw.stat.pa.us/pch_comptest

List any Questions OR Comments you may have in the box below.

Application for Employment With Cornerstone Living

Part 1. GENERAL INFORMATION

Please review all questions carefully before preparing your application.

POSITION APPLIED FOR (Job title)							
NAME (Last, First, and Middle Initial)				SOCIAL SECURITY NO. (Used for processing -Optional)			
MAILING ADDRESS (Include apartment number, if any)			E-MAIL ADDRESS		HOME TELEPHONE		
CITY	COUNTY	STATE	ZIP	WORK (or message) TELEPHONE			

Current Status

Are you currently employed?

NO, YES JOB TITLE: _____

Current Employer:

If currently employed please describe the job:

Employment Preferences:

• Are you willing work flexible shifts? YES NO

• Check types of employment you will accept:

SHIFT				SCHEDULE			
<input type="checkbox"/> DAY	<input type="checkbox"/> PM	<input type="checkbox"/> NIGHT	<input type="checkbox"/> ROTATING	<input type="checkbox"/> FULL-TIME	<input type="checkbox"/> PART-TIME	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/>
				<input type="checkbox"/> PROJECT	<input type="checkbox"/> SEASONAL	<input type="checkbox"/>	

Part 2. BACKGROUND INFORMATION

• If a driver's license or other license, certificate, or registration may be required for this position, please complete the following:

License, Certificate, Other	License Number	Expiration Date
Driver's License		
State Certification		
Other (Indicate type)		

• Other than English, what languages do you speak, read, or write fluently? _____

• Have you been convicted of a misdemeanor or felony? _____

YES NO

If Yes, Please explain:

How did you learn of this employment opportunity?

<input type="checkbox"/> CURRENT EMPLOYEE	<input type="checkbox"/> JOB FAIR – LOCATION:	<input type="checkbox"/> STATE AGENCY (list office and location):
<input type="checkbox"/> NEWSPAPER	<input type="checkbox"/> WEBSITE <input type="checkbox"/> OTHER WEBSITE: _____	<input type="checkbox"/> JOB LINE INFORMATION <input type="checkbox"/> OTHER: _____

Part 3. EDUCATION AND TRAINING

Review of Education:

- Have you graduated from high school or passed the GED? YES NO
- List college, business school, military training, and other relevant education.

School Name and Location	Month and Year Attended	Credits Earned			Major	Typed of Degree Awarded	Year degree received
		Quarter	Semester	Other (Specify)			
1	From /						
	To /						
2	From /						
	To /						
3	From /						
	To /						

Part 4. EMPLOYMENT HISTORY

This section must be completed in order to receive full credit. You may use this form for both volunteer and paid experience. For volunteer work, 174.3 hours equals one month of experience. If you need more spaces, see next page.

1. Present or Last Employer		Employer's Address			Employer's Phone Number		
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary		
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised			
Specific Duties:							
2. Present or Last Employer		Employer's Address			Employer's Phone Number		
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary		
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised			
Specific Duties:							
3. Present or Last Employer		Employer's Address			Employer's Phone Number		
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary		
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised			
Specific Duties:							
4. Present or Last Employer		Employer's Address			Employer's Phone Number		
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary		
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised			
Specific Duties:							
5. Present or Last Employer		Employer's Address			Employer's Phone Number		
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary		
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised			
Specific Duties:							

Part 4. EMPLOYMENT HISTORY (Continued)

6. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised	
Specific Duties:					
7. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised	
Specific Duties:					
8. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised	
Specific Duties:					
9. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised	
Specific Duties:					
10. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week	Last Salary
Immediate Supervisor's Name	Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised	
Specific Duties:					

Part 5. DATE AND SIGNATURE

TO BE ACCEPTED, YOU MUST SIGN AND DATE THIS APPLICATION.	All answers and statements are true and complete to the best of my knowledge. I understand that Cornerstone Living may verify information, and that untruthful or misleading answers are cause for rejection of this application, or dismissal if employed.	
	/ /	
	Date (Month/Day/Year)	Signature

Cornerstone Living is an equal opportunity employer and employs individuals with requisite training, capability and experience regardless of race, religion, gender, national origin, sexual orientation or handicap, with reasonable accommodation.

- Thank you for submitting this employment application -