

# BARTLETT WOODS RETIREMENT COMMUNITY

AN EQUAL OPPORTUNITY EMPLOYER

## Employment Application Form

### *General Information and Instructions*

- All items on application forms must either be filled out or marked “NA” meaning that they do not apply to applicant. Please fully complete the application. **IMPORTANT:** Page 3 must be completed and signed.  
If you need assistance please ask.
- Bartlett Woods is an Equal Opportunity Employer and does not discriminate against an employee or an applicant for employment due to race, color, sex, marital status, physical/mental handicap, religion, age, ancestry or national origin based upon a bona fide occupational qualification.
- Bartlett Woods shall employ the best qualified persons who are available at the salary levels established for Bartlett Woods employment.
- Upon appointment, all employees shall be subject to a period of three months probation unless otherwise specified by the personnel policy.

**Please return signed application along with any supplemental material in person or by mail to:**

**Bartlett Woods  
Attn: Personnel Division  
20 Bartlett Drive  
Rockland, ME. 04841**

**Telephone (207) 594-2745**



**BARTLETT  
WOODS**

Revised 8/31/2016

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## FOR OFFICE USE ONLY

Position \_\_\_\_\_

Interview Date \_\_\_\_\_

Notified of Status \_\_\_\_\_

Accept     Deny

## PLEASE CHECK EMPLOYMENT YOU ARE SEEKING.

Full Time     Part Time     Temporary  
 Day Shift     Evening Shift     Night Shift  
 Per Diem

## PLEASE PRINT

Date: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email: \_\_\_\_\_

## EDUCATION AND TRAINING

Name of school	City/State	Did you graduate?	If no, # of years left to graduate	If yes, date of graduation	Degree received	Major
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Other School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				

Other credentials/licenses/professional affiliations, etc., which are relevant to the job(s) for which you are applying:



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## EXPERIENCE

List below in reverse chronological order, the positions you have held, beginning with your present or most recent job. Under "Description of Duties" list kind of work, your responsibilities, and the number of employees supervised, if any. Use additional sheets if needed and attach with resume if available.

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From: \_\_\_\_\_ To: \_\_\_\_\_ Title of Position: \_\_\_\_\_

Name & Address of Employer: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Number of Hours Worked Per Week: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_ Permission to contact for a reference?  Yes  No

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From: \_\_\_\_\_ To: \_\_\_\_\_ Title of Position: \_\_\_\_\_

Name & Address of Employer: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Number of Hours Worked Per Week: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_ Permission to contact for a reference?  Yes  No

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From: \_\_\_\_\_ To: \_\_\_\_\_ Title of Position: \_\_\_\_\_

Name & Address of Employer: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Number of Hours Worked Per Week: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_ Permission to contact for a reference?  Yes  No

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## EMPLOYMENT REFERENCES (SUPERVISORS, CO-WORKERS, CLIENTS)

Name:	Address	Phone	Reference Position
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_____	_____	_____	_____
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_____	_____	_____	_____
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_____	_____	_____	_____
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## EMERGENCY CONTACTS:

Name: \_\_\_\_\_

Relation: \_\_\_\_\_ Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Cell): \_\_\_\_\_

Name: \_\_\_\_\_

Relation: \_\_\_\_\_ Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Cell): \_\_\_\_\_

Name: \_\_\_\_\_

Relation: \_\_\_\_\_ Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Cell): \_\_\_\_\_

Have you ever been convicted of a crime? .....  Yes  No

If yes, explain: \_\_\_\_\_

Have you ever applied here or worked for the company previously? .....  Yes  No

If yes, when: \_\_\_\_\_

Date Available to Start: \_\_\_\_\_ Expected Starting Salary: \_\_\_\_\_

## PLEASE READ BEFORE SIGNING:

I hereby certify that the information provided in this application form contains no falsifications, misrepresentations, or omissions and I understand that misstatements or omissions of material fact could subject me to disqualification or dismissal.

The undersigned applicant hereby expressly authorizes Bartlett Woods, its agents and employees to make any investigation of my personal employment history that may be necessary to make an employment decision, expressly including, but not limited to federal and/or state criminal, law enforcement or traffic records. I further authorize any former employers, person, firm, corporation, administrative body or governmental to give Bartlett Woods, its agents or employees, any information they may have regarding me. In consideration of the review of my employment application by Bartlett Woods, its agents or employees, I hereby release Bartlett Woods and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information.

I further understand that any offer of employment is conditional upon satisfactory completion of a physical examination at the expense of Bartlett Woods, when the nature of the position requires one, and that the physical examination will focus on my present ability to perform the duties of the position.

Date: \_\_\_\_\_ Signed by: \_\_\_\_\_

Print full name

Signature



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