



# APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_

1050 Valdosta Highway / Homerville, GA 31634 (912) 487-5211  
www.clinchmh.org

This institution is an equal opportunity provider and employer.  
DFWP

| PERSONAL DATA  |   |   |   |                             |
|--|---|---|---|-----------------------------|
| Last Name  | First Name  | Middle Name   | Maiden Name   |                             |
| Current Address  | Number and Street   | City  | State   | Zip Code                    |
| Social Security Number(Last four digits)   |   |   |   | XXX-XX-                     |
| Previous Address   | Number and Street   | City  | State   | Zip Code                    |
| Telephone Number   |   |   | Are you at least 18?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  |                             |
| Position Desired   | Desired Salary  | <input type="checkbox"/> Full Time<br><input type="checkbox"/> Part Time<br><input type="checkbox"/> Temp | Willing to work?<br>Evening <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Night <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Weekends <input type="checkbox"/> Yes <input type="checkbox"/> No | Email Address               |
| Are you able to perform the essential, job related functions of the position for which you are applying with or without reasonable accommodations? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |   |                             |
| Are you currently excluded from participation in any federally funded healthcare program-including Medicare and Medicaid and are you aware of any potential exclusion from a federally funded health program? <input type="checkbox"/> Yes <input type="checkbox"/> No |   |   |   |                             |
| EDUCATION DATA   |   |   |   |                             |
| Name and Address of High School  |   |   | Dates Attended  | Graduate? Date              |
| Name and Address of College  |   | Course or Major   | Dates Attended  | Graduate? Degree            |
| Name and Address of Other  |   | Course or Major   | Dates Attended  | Graduate? Degree or Diploma |
| PERSONAL REFERENCES  |   |   |   |                             |
| Name and Address   |   | Telephone Number  | Email Address   |                             |
| Name and Address   |   | Telephone Number  | Email Address   |                             |
| Name and Address   |   | Telephone Number  | Email Address   |                             |
| EMPLOYMENT DATA-Begin with your most recent job.   |   |   |   |                             |
| Employer's Name  | May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |   | Dates of Employment:<br>From: To:   |                             |
| Employer's Address   | Telephone#  |   | Supervisor's Name:  |                             |
| Reason for Leaving   | Email address   |   | Starting Salary   | Ending Salary               |
| Employer's Name  | May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |   | Dates of Employment:<br>From: To:   |                             |
| Employer's Address   | Telephone#  |   | Supervisor's Name:  |                             |
| Reason for Leaving   | Email address   |   | Starting Salary   | Ending Salary               |
| Employer's Name  | May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |   | Dates of Employment:<br>From: To:   |                             |
| Employer's Address   | Telephone#  |   | Supervisor's Name:  |                             |
| Reason for Leaving   | Email address   |   | Starting Salary   | Ending Salary               |
| SKILLS   |   |   |   |                             |
| List Number and Expiration Date of any Professional Occupational license   |   | State   | Driver's License #(Last four digits)  |                             |
| Are You Computer Literate? What Software?  |   | Typing speed?   | Office Equipment?   |                             |



Clinch Memorial Hospital is an equal opportunity employer. As required by law, we must record certain information to be made a part of our affirmative action program.

Applicants for employment are invited to participate in the affirmative action program by reporting their status as a protected veteran or other minority. In extending this invitation, we advise you that: (a) workers (applicants) are under no obligation to respond but may do so in the future if they choose; (b) responses will remain confidential within the human resource department; and (c) responses will be used only for the necessary information to include in our affirmative action program. We are a company that values diversity. We actively encourage women, minorities, veterans and disabled employees to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

**TO BE COMPLETED BY APPLICANT ON A VOLUNTARY BASIS, NOT FOR INTERVIEW PURPOSES, FILE SEPARATELY FROM APPLICATION.**

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

Gender  Male  Female Position Applied for: \_\_\_\_\_

**Race or Ethnicity Identity\* (select one, see back for definitions)**

- Hispanic or Latino
- White (not Hispanic or Latino)
- Black or African American (not Hispanic or Latino)
- Native Hawaiian or Pacific Islander (not Hispanic or Latino)
- Asian (not Hispanic or Latino)
- American Indian or Alaskan Native (not Hispanic or Latino)
- Two or more races (not Hispanic or Latino)

**Veteran Status\*\* (see back for definitions)**

- I am a protected veteran
- I am NOT a protected veteran
- I do not wish to self-identify

How did you hear of our opening?  employee referral  company website  job board  social media  
 advertisement - please explain \_\_\_\_\_  recruiter  other - please explain: \_\_\_\_\_

**For Administrative Use**

Position(s) applied for \_\_\_\_\_  Current opening  No current opening

Hired?  No  Yes Hire date \_\_\_\_\_

**Position classification**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Office and clerical Workers | <input type="checkbox"/> Sales Workers   | <input type="checkbox"/> Technicians           |
| <input type="checkbox"/> Operatives (semi-skilled)   | <input type="checkbox"/> Service Workers | <input type="checkbox"/> Laborers (unskilled)  |
| <input type="checkbox"/> Craft Workers (skilled)     | <input type="checkbox"/> Professionals   | <input type="checkbox"/> Official and Managers |

## **\*EEOC RACE/ETHNIC IDENTIFICATION CATEGORIES**

**Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

**White (*not Hispanic or Latino*)** - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

**Black or African American (*not Hispanic or Latino*)** - A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander (*not Hispanic or Latino*)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.

**Asian (*not Hispanic or Latino*)** - A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

**American Indian or Alaska Native (*not Hispanic or Latino*)** - A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.

**Two or more races (*not Hispanic or Latino*)** - All persons who identify with more than one of the above races.

## **\*\*PROTECTED VETERAN DEFINITION**

**Protected veteran** means a veteran who may be classified as an active duty wartime or campaign badge veteran, disabled veteran, Armed Forces service medal veteran or recently separated veteran.

**Active duty wartime or campaign badge veteran** means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.

**Armed Forces service medal veteran** means any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209, 3 CFR, 1996 Comp., p. 159).

**Disabled veteran** means (1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, *or* (2) a person who was discharged or released from active duty because of a service-connected disability.

**Recently separated veteran** means a veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.