

## *Little Sisters of the Poor*

# Application for Employment

Please complete this application fully, use additional paper if necessary.

The Little Sisters of the Poor is an equal opportunity employer and does not discriminate in terms or conditions of employment on the basis of race, color, sex, religion, national origin, age, physical or mental disability, military or veteran status, or any other category protected by federal, state or local laws, regulations or ordinances. Equal access to programs, services and employment is available to all persons.

### IMPORTANT NOTICE OT APPLICANTS WITH DISABILITIES

Applicants and employees with disabilities will be entitled to reasonable accommodation under the Americans with Disabilities Act and certain state and local laws. A reasonable accommodation is a change in the way things are normally done which will assist an employee in performing his or her job, without imposing undue hardship on the organization.

In evaluating your ability to perform the job applied for, you may be asked to describe or demonstrate how you will be able to perform essential job functions, with or without a reasonable accommodation. After an offer, or after commencing employment, if you require an accommodation, please request one.

Please inform a Little Sisters of the Poor human resources representative if you need assistance completing any forms, being interviewed, or to participate otherwise in the application/pre-hire process.

<b>First Name</b>	<b>Middle Name</b>	<b>Last Name</b>	<b>Date of Application</b>
<b>Street Address</b>			<b>Position(s) applied for</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Contact information</b> (Home) _____ (Cell) _____ (Email) _____
1. Have you ever been employed by the Little Sisters of the Poor (LSP)?    Yes <input type="checkbox"/> No <input type="checkbox"/> 2. Have you ever been employed by the Little Sisters of the Poor under a different name?    Yes <input type="checkbox"/> No <input type="checkbox"/> 3. Any friends or relatives currently employed by the Little Sisters of the Poor (LSP)?    Yes <input type="checkbox"/> No <input type="checkbox"/>  <b>Name of friend/relative who is employed by LSP:</b> _____  <b>How did you hear about us?</b> _____			<b>Salary expected</b>

**Availability to Work (Check all that apply)**

<b>If selected for employment, when would be able to begin work?</b>			
Days _____	Evenings _____	Nights _____	
Full time _____	Part time _____	Weekends _____	Holidays _____ As needed (PRN) _____

**Education**

<b>Circle the Highest Grade Completed</b>	<b>Elementary/Grammar School 1 2 3 4 5 6 7 8</b>	<b>High School 1 2 3 4</b>	<b>College 1 2 3 4</b>
<b>Name of High School</b>	<b>Location</b>	<b>Grade Average</b>	<b>Graduate or GED?</b> Yes _____ No _____
<b>Name of College</b>	<b>Location</b>	<b>Degree/Major</b>	<b>Graduate?</b> Yes _____ No _____
<b>Other Formal Education or Special Training You Have Attended</b>	<b>Location</b>	<b>Training Received</b>	<b>Graduate?</b> Yes _____ No _____

**Employment Experience**

List all the places you have been employed for the past 10 years, including dates and positions held, beginning with your current or most recent place of employment. Please do not submit a resume in lieu of completing this portion of the application. Use additional pages if necessary.

<b>Employer's Name Address and Supervisors Name and Title</b>	<b>Position Held</b>	<b>Dates of Employment</b>	<b>Reason for Leaving</b>
<b>1. Current or most recent employment</b> _____ _____ _____	_____	<b>From:</b>  <b>To:</b>	_____ _____ _____
<b>2. Previous employment</b> _____ _____ _____	_____	<b>From:</b>  <b>To:</b>	_____ _____ _____
<b>3. Previous employment</b> _____ _____ _____	_____	<b>From:</b>  <b>To:</b>	_____ _____ _____
<b>4. Previous employment</b> _____ _____ _____	_____	<b>From:</b>  <b>To:</b>	_____ _____ _____

**Personal References (please list 2 personal references, excluding relatives)**

Name	Address	Telephone Number
1.		
2.		

**Professional References (please list 2 supervisors/managers who you can attest to your professional ability)**

Name	Address	Telephone Number
1.		
2.		

**Please answer the following questions:**

1. Are you able to perform the essential functions of the job for which you are applying? (Refer to job description). If you are able to perform the essential functions of the job, but will require a reasonable accommodation in order to do so, please simply answer "yes" without explanation.

Yes No (circle one)

If you circle No, please explain:

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*NOTE: This question is not intended to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed as needed, at a later date, to the extent permitted by law.*

2. Have you ever been convicted of a crime involving abuse, neglect or mistreatment of any person or theft and/or robbery?

\_\_\_\_\_Yes \_\_\_\_\_No

If you indicated "yes", please explain the nature and date of the conviction(s) below. A criminal conviction will not be an automatic bar to employment. The Little Sisters of the Poor will consider such factors as the nature, date and circumstances of the offense, the length of time since the offense occurred, the sentence, and any indication of rehabilitation, in determining whether the offense is relevant to the duties of the position applied for. For any convictions identified, please explain in detail the nature of the offense(s), the date(s) the offense(s) occurred, the sentence(s) imposed, and the type(s) of rehabilitation that occurred.

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**APPLICANT STATEMENT**

I hereby affirm that the information provided on this application (and accompanying resume, if provided) and all information I provide prior to being hired, is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for termination of my employment if discovered at a later date.

I expressly authorize, without reservation, the employer, its representative, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that, if hired, my employment will be at will and I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary. I further understand that only the Mother Superior of the Home has any authority to enter into any agreement contrary to the foregoing or make and oral assurances or promises of continued employment.

I understand that this employer does not intend to unlawfully discriminate in employment and no question of this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by the applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand employment with the Home is conditional upon verification of information in this application or resume (if provided).

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date

**FOR MARYLAND APPLICANTS ONLY:**

**UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.**

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Signature of Applicant

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Date