

# Vantage Health Plan, Inc.

## CONFIDENTIAL APPLICATION FOR EMPLOYMENT

### For Office Use Only

Hired \_\_\_\_\_

Dept \_\_\_\_\_

Start Date \_\_\_/\_\_\_/\_\_\_

Salary\$ \_\_\_\_\_

(PLEASE PRINT)

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

Position Applied For \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you are not a citizen of this country, what is your status? Do you have work papers?

\_\_\_\_\_

Are you a veteran? \_\_\_\_\_ Yes \_\_\_\_\_ No

### EDUCATION

(Please record your education below.)

	Name of school/location	Did you graduate?
High School	_____	_____
Bus./Trade	_____	_____
College/Univ.	_____	_____
Graduate/Professional	_____	_____

### PREVIOUS EMPLOYMENT AND REFERENCES

(Give in chronological order beginning with the most recent position)

PRESENT or LAST EMPLOYER \_\_\_\_\_

Name and Address of Firm \_\_\_\_\_

\_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held \_\_\_\_\_

Ending Salary \_\_\_\_\_ Reason for leaving \_\_\_\_\_

\_\_\_\_\_

**PREVIOUSLY EMPLOYED BY** \_\_\_\_\_

Name and Address of Firm \_\_\_\_\_  
\_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Nature of business \_\_\_\_\_

Dates of employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) held \_\_\_\_\_

Ending salary \_\_\_\_\_ Reason for leaving \_\_\_\_\_  
\_\_\_\_\_

**PREVIOUSLY EMPLOYED BY** \_\_\_\_\_

Name and Address of Firm \_\_\_\_\_  
\_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Nature of Business \_\_\_\_\_

Dates of Employment From \_\_\_\_\_ To \_\_\_\_\_

Position(s) held \_\_\_\_\_

Ending salary \_\_\_\_\_ Reason(s) for leaving \_\_\_\_\_  
\_\_\_\_\_

**PERSONAL REFERENCES**

(Please give the names, addresses and phone numbers of three persons to whom you are not related.)

Name \_\_\_\_\_ Phone# \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone# \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone# \_\_\_\_\_

Address \_\_\_\_\_

Who recommended you to us? (Person or Agency) \_\_\_\_\_

Summarize special skills and qualifications acquired from employment and other experience. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted for a felony? \_\_\_\_\_

Have you ever been terminated from employment? \_\_\_\_\_

If yes, explain. \_\_\_\_\_

\_\_\_\_\_

<b>JOB APPLICATION DISCLAIMER AND ACKNOWLEDGEMENT</b>
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I certify that the information contained in this application is current to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

I authorize any of the persons and organizations listed on this application to give you any and all information concerning my previous employment, education, and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to conform to the rules and regulations of the company. I acknowledge that rules may be changed, withdrawn, added, or interpreted at any time, at the company's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself. I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to promise any other personnel action, either before or after I accept employment or to make any other agreement which is contrary to this agreement.

I have read and understand this agreement.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_