

21 High Street
East Hartford, CT 06118
(860) 568-8881

NURSING SERVICES, INC.
NSI/ELDERFORCE, INC.
1-800-742-4901

473 Main Street
Old Saybrook, CT 06475
(860) 395-1300

TYPE OF WORK: R.N. L.P.N. C.N.A. H.H.A.

STATES LICENSED: _____ REGISTRATION NO.: _____ EXPIRES: _____ EFFECTIVE: _____
SHIFTS DESIRED: 7 - 3 3-11 11-7 Live-In Hourly: _____

DAYS DESIRED: Sun Mon Tue Wed Thu Fri Sat

PLEASE PRINT

NAME:	Last	First	Middle Initial					
ADDRESS:	City	State	Zip					
HOME PHONE:	OTHER PHONE:	SOCIAL SECURITY NO.						
Emergency Notification:	Relationship:	Phone:						
<u>EDUCATION</u>								
High School:	Address:	State:	Zip:	Last Yr. Attended:	Diploma/Certificate:			
College:	Address:	State:	Zip:	Last Yr. Attended:	Diploma/Certificate:			
Other Type Training:	Address:	State:	Zip:	Last Yr. Attended:	Diploma/Certificate:			
<u>EMPLOYMENT</u>								
Present or Last Employer:	Address:			City	State	Zip:	Supervisor:	Phone:
Position:	Dates of Employment:			From:	To:			
Salary:	Reason For Leaving:							
Prior Employer:	Address:			City	State	Zip:	Supervisor:	Phone:
Position:	Dates of Employment:			From:	To:			
Salary:	Reason For Leaving:							
Have you ever been convicted of a crime?				<input type="checkbox"/> YES	<input type="checkbox"/> NO			
The information given in this application is correct to the best of my knowledge.								
SIGNATURE:	DATE:		REFERRED BY:					

APPLICANT RELEASE/ACKNOWLEDGEMENT STATEMENT

***** Please Read Carefully Before Signing *****

NON-DISCRIMINATION NOTICE

Nursing Services, Inc. is an Equal Opportunity Employer. In accordance with Title VI of the Civil Rights Acts of 1964 (42 U.S.C. 2000d et seq), Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794 and the Age Discrimination Act of 1975, as amended (42 U.S.C. 6101 et seq), and other applicable discriminatory statutes, Nursing Services, Inc. does not discriminate on the basis of race, color, sex, religion, marital status, national origin, ancestry, disability, age, or other applicable unlawful discriminatory standards, in admission or access to, or treatment, or employment in its program or activities. A designated employee coordinates our efforts to comply with the U. S. Department of Health and Human Services regulations (45 C.F.R. Parts 80, 84 and 91) implementing these federal laws. For further information about the regulations and our grievance procedures for resolution of disability discrimination complaints, please send your request to: Nursing Services, Inc., 21 High Street, East Hartford, CT 06118 (860) 568-8881.

I certify that the information I have given on this application is accurate and complete to the best of my knowledge. I understand that any omissions, misstatements, or falsification of information on this application or during the selection process will be considered sufficient cause for refusal of employment or dismissal at anytime if I am hired.

I authorize Nursing Services, Inc. to make a complete investigation of all statements and information contained in this application. I release from any/all liability or responsibility all parties (including companies or corporations) supplying information to Nursing Services, Inc. Nursing Services, Inc. is committed to providing a safe, secure and drug free work environment and requires successful completion of pre-employment State Police background investigation and drug test. I give consent to Nursing Services, Inc to conduct a pre-employment State Police background investigation, at NSI's expense. I consent to having a pre-employment urinalysis drug test done, at my expense.

I understand that any offer of employment made to me is conditional and subject to:

- Satisfactory results of a pre-employment State Police background investigation
- Passing a pre-employment Physical Examination, Tuberculin Test (PPD), or Chest X-Ray if PPD is positive, and Drug Test.
- Receipt of acceptable references.

I understand that this is an application and is not intended to be a contract of employment. I further understand that if I am hired by Nursing Services, Inc. this Company may terminate any employee at anytime with or without notice or cause, and that any employment of me by Nursing Services, Inc. will not begin until I report for work on my first assigned work date.

Thank you for your interest in employment with Nursing Services, Inc.

Signature: _____

Date: _____

