

**Mosaic Management, Inc.**  
Employment Application

**Mosaic Management, Inc.** is an equal opportunity employer and makes employment decisions on the basis of merit. Mosaic Management's Policy prohibits unlawful discrimination based on race, color, sex, religion, national origin, ancestry, a physical or mental impairment that substantially limits one or more major life activities, marital status, age or any other consideration made lawful by federal or local laws. All such discrimination is unlawful.

**PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION REQUESTED.**

**NAME AND ADDRESS**

Name \_\_\_\_\_  
Last First Middle

Current Address \_\_\_\_\_  
Number Street Name

City State Zip Code

Home Phone No. \_\_\_\_\_ Work (or message) Phone No. \_\_\_\_\_  
(Area Code) Number (Area Code) Number

Email Address \_\_\_\_\_

**POSITION DESIRED**

What location are you applying for (Community Name or City/State)? \_\_\_\_\_  
What position(s) are you applying for? \_\_\_\_\_  
Salary History? \_\_\_\_\_

**WORK SCHEDULE**

What type of employment do you want?  Full  Part time  Temporary  Seasonal

When can you start? Date: \_\_\_\_\_

Note: You are *not* required to indicate your schedule unavailability, if due to religious practice, before a job offer is made. If you have such an issue *after* a job offer is made, please notify the Facility manager or person who has made a job offer to you.

What hours/days are you available to work? \_\_\_\_\_  
What hours/days are you *not* available to work? \_\_\_\_\_  
Who referred you/how did you hear about us? \_\_\_\_\_

**EMPLOYMENT STATUS**

Are you currently employed?  Yes  No If "Yes," how many jobs do you currently hold? \_\_\_\_\_

Is your intent to continue in your current job(s) if you work for this Community?  Yes  No

**EMPLOYMENT HISTORY**

In the past 5 years how many different employers have you worked for? \_\_\_\_\_  
Have you worked in this state for the past 5 years?  Yes  No If "No," please list all other states you have worked in during the last 5 years: \_\_\_\_\_

**EMPLOYMENT RECORD**

List most recent employer first. Include military service (not country of service), or any self-employed or unemployed periods. You must account for the past ten (10) years or since completing school, whichever is shorter. A detailed resume containing all of the information requested below may be submitted.

**Employer**

Company \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone No. \_\_\_\_\_  
Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Last Salary: \_\_\_\_\_  
Last Position Held \_\_\_\_\_  
Last Supervisor's Name \_\_\_\_\_  
Why Did You Leave? Be Specific \_\_\_\_\_

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**Employer**

Company \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone No. \_\_\_\_\_  
 Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Last Salary: \_\_\_\_\_  
 Last Position Held \_\_\_\_\_  
 Last Supervisor's Name \_\_\_\_\_  
 Why Did You Leave? Be Specific \_\_\_\_\_

**Employer**

Company \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone No. \_\_\_\_\_  
 Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Last Salary: \_\_\_\_\_  
 Last Position Held \_\_\_\_\_  
 Last Supervisor's Name \_\_\_\_\_  
 Why Did You Leave? Be Specific \_\_\_\_\_

**EDUCATION AND TRAINING**

	<u>Name and Location of School</u>	<u>Graduation Date</u>	<u>Course of Study/Degree Issued</u>
<u>High School</u>	_____ _____	_____	_____
<u>College</u>	_____ _____	_____	_____
<u>Other</u>	_____ _____	_____	_____

**LICENSURE/CERTIFICATION**

Do you have any applicable professional licenses?  Yes  No

<u>Type of License/Certification</u>	<u>Issuing State</u>	<u>License/Certification Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any special skills or qualifications which you possess and feel are relevant to health and senior care and the position for which you are applying:

**BUSINESS MACHINES, IF APPLYING FOR AN OFFICE/CLERICAL POSITION**

Check the business machines you can operate (indicate speed where requested):

Keyboard Type, WPM \_\_\_\_\_     
  Word Processor, WPM \_\_\_\_\_     
  Calculator  
 Computer     
  CRT     
  Data Processor  
 Shorthand, WPM \_\_\_\_\_     
 Other? \_\_\_\_\_

**DRIVING INFORMATION**

Do you have any driving restrictions?  Yes  No

Do you have a valid Driver's License?  Yes  No

What driving infractions have you had during the last five (5) years?

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Do you have a Chauffeur's Driver's License?  Yes  No

**OTHER INFORMATION**

Have you ever been employed previously by Mosaic Management, Inc.?  Yes  No

If "Yes," location? \_\_\_\_\_

Date of Employment: \_\_\_\_\_

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

Have you ever been known by a different name?  Yes  No

Please explain: \_\_\_\_\_

Can you perform the essential functions for the job applied for?  Yes  No

**CRIMINAL HISTORY**

Have you ever been found to have committed abuse?  Yes  No

If "Yes", please explain: \_\_\_\_\_

Are you legally eligible to work in the United States?  Yes  No

*\*Offer of employment is conditional on approved background check.*

**PERSONAL REFERENCES**

(Give names of 2 persons, not relatives or former employers, who have known you for 5 years or more)

Name \_\_\_\_\_ Name \_\_\_\_\_

Current Address \_\_\_\_\_ Current Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Number of years known \_\_\_\_\_ Number of years known \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

**REFERRAL INFORMATION**

How were you referred to Mosaic Management, Inc.?  Internet  Newspaper  Walk-in  Employee Referral  
 Other \_\_\_\_\_

**CONDITIONS OF EMPLOYMENT**

Mosaic Management, Inc. sets high standards for its employees. Compliance with these standards is a Condition of Employment. You need to carefully consider these requirements before accepting a position with us. As an employee, you will be expected to comply in full to the following conditions and other conditions of employment set out in the Community Employee Handbook, which you will receive if hired.

**CUSTOMER SERVICE**

Treat residents with an exceptionally friendly attitude at all times and under all circumstances.

**ATTENDANCE/PUNCTUALITY**

Always report to work when scheduled and on time.

Call the Community before your scheduled shift when unable to report to work as scheduled.

**PERSONAL APPEARANCE**

Maintain a business-like, professional appearance (dress and grooming).

Wear your Community name badge at all times.

Would you be able to comply with all of the requirements as listed?  Yes  No

If "No", or you have concerns about complying with any requirements, please explain: \_\_\_\_\_

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**ACKNOWLEDGEMENT AND AGREEMENTS**

ALL APPLICANTS – Please read the following and address any questions to the Mosaic Management, Inc.’s Representative before signing below:

I hereby affirm my answers to the foregoing questions are true and correct. I understand that misrepresentation of the facts will result in immediate dismissal. This Employment Application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and as applicable, information concerning my employment, education, general reputation, character, personal characteristics, and habits, and that such information may be developed through personal interviews with third parties such as family members, neighbors, friends, associates, former employers, financial sources, and custodians of official records. Only job-related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or record.

I authorize the Company to release to any person, firm, entity or organization with which I may seek employment in the future, any truthful information concerning my work experience with the company. I hereby release and hold the Company harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand that satisfactory reports are a condition of my employment with Mosaic Management, Inc. I further understand that my employment with Mosaic Management, Inc. will be terminated if management determines that said reports are unsatisfactory. I also acknowledge that from time to time, Mosaic Management, Inc. may be required to submit certain information with regard to my employment or application for employment. I hereby release the Company, its agents, assigns and subsidiaries from any liability resulting from submitting such information.

I understand that my employment is at will and that I can be terminated at any time, with or without notice and with or without any reason. I understand that if I am employed, employment is not for a stated period. Mosaic Management, Inc. or I may discontinue the employment relationship at any time without cause or notice. Only the President of Mosaic Management, Inc. has the authority to enter into an agreement contrary to the foregoing, and then such agreement must be in writing and signed by President. No other practice, written or oral policy or statement by anyone, including for managers or any other management personnel can alter this employment relationship. I acknowledge that Mosaic Management, Inc. may request either prior to and/or after employment that I undergo drug testing and may request, after an offer has been made, a medical exam. I consent and agree to any such exam, if required, or in the future. I understand that when pre-employment drug testing is required, a satisfactory result is a condition of employment with Mosaic Management, Inc.

I hereby certify that all statements and answers made on this Employment Application are complete and true. I understand that if subsequent to employment any of such statements and/or answers are found to be false or that information is omitted, such false statements or omissions will result in termination of my employment.

If Mosaic Management, Inc. deems it necessary to obtain a criminal record check or driver’s record on me, by signing this application I hereby authorize Mosaic Management, Inc. to request my criminal history information and driver’s record.

This application is valid for three (3) months from the date it is signed, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application. If you are applying for a position at a Community that is under development, we will file your information and will contact you when hiring begins.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_