



Thank you for your interest in working with The Gables of Canton!
Please complete this application in its entirety and submit to jobs@gablesforcanton.com

Applicant Information		
Full Name (Last, First, Middle Initial)		Application Date
Street Address		Apt/Unit #
City	State	ZIP Code
Phone Number	Email Address	

Position of Interest & Availability	
Position Applied For	Desired Salary
Other Positions That Interest You	Date Available to Start Work
Time Availability (Check All That Apply) <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> PRN	How Did You Hear About Us?
Are You a U.S. Citizen? <input type="checkbox"/> No <input type="checkbox"/> Yes	If You are NOT a Citizen, Are You Authorized to Work in the U.S.? <input type="checkbox"/> No <input type="checkbox"/> Yes
Have You Previously Worked at a Gables Community? <input type="checkbox"/> No <input type="checkbox"/> Yes - Explain Where/When:	
Have You Ever Been Convicted of a Crime? (Do not include convictions sealed or expunged pursuant to a court order.) <input type="checkbox"/> No <input type="checkbox"/> Yes - Please Explain:	

Education - Licenses - Honors			
College Name & Address	Dates Attended	Graduated?	Degree
High School Name & Address	Dates Attended	Graduated?	Degree
Other Education (Including Conferences, Workshops, Seminars, Certifications)			
Honors, Achievements, Hobbies, or Organizations (Professional or Social)			

Military Service		
Branch	Dates Served	Rank at Discharge
Type of Discharge (Please Include Explanation if Discharge was not Honorable)		

Previous Employment

Company (Please List Most Recent Employment Information First)

Address		Phone
Job Title	Employed From	Employed To
Responsibilities	Starting Salary	Ending Salary
Reason for Leaving	Supervisor	May We Contact Your Previous Supervisor for a Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

Company		
Address		Phone
Job Title	Employed From	Employed To
Responsibilities	Starting Salary	Ending Salary
Reason for Leaving	Supervisor	May We Contact Your Previous Supervisor for a Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

Company		
Address		Phone
Job Title	Employed From	Employed To
Responsibilities	Starting Salary	Ending Salary
Reason for Leaving	Supervisor	May We Contact Your Previous Supervisor for a Reference? <input type="checkbox"/> Yes <input type="checkbox"/> No

Professional References

Full Name	Relationship	Company	Phone
Full Name	Relationship	Company	Phone
Full Name	Relationship	Company	Phone



The Gables of Canton

WHERE PEOPLE MATTER MOST

Disclaimer & Signature

I certify that the above information is true and correct and give my authorization to THE GABLES OF CANTON for investigation of all statements and information contained in this application, my resume, and other documents or verbally obtained during an employment interview. I voluntarily consent to allow THE GABLES OF CANTON or any of its representatives or agents to check my references by contacting any persons, company or governmental entity they deem to be an appropriate reference. I understand these questions may pertain to my personal or educational background, work experience, character and behavior. I understand my employment is subject to satisfactory verification of this information and agree that deliberate falsification of this document or significant omissions shall be grounds for employment consideration disqualification or dismissal from employment, if discovered at a later date. The following reports may be checked: Systems of Awards Management, Office of Inspector General, Department of MRDD Abuser Registry, Sex Offender Search, Offender Search, Nurse Aide Registry, and National Sex Offender Registry Public Website. Upon hire a BCII/FBI will be completed

By applying to work at THE GABLES OF CANTON, I understand that THE GABLES OF CANTON is authorized to perform background checks and provide reports in conjunction with this job application. If hired, I understand this consent will apply throughout employment to the extent permitted by law, I authorize the reports and the results of the background checks to be released to THE GABLES OF CANTON hiring managers with a need to know.

I understand that completion of this Application for Employment does not imply or guarantee employment by THE GABLES OF CANTON. All employment by THE GABLES OF CANTON is at-will and as such, the relationship may be terminated by either THE GABLES OF CANTON or myself, at any time, with or without notice and with or without cause. I understand that company policies, procedures, practices or statements made during an interview or employment do not create an employment contract by implication or otherwise.

Signature

Date