Date: _____ Job Application

Starting Date: _____

Veritas Care of Maine
400 Riverside St. Suite A4
Portland, ME 04103
(207)747-8534

VERITAS CARE
OF MAINE INC

Job Application

First Name: _____ Last Name: _____

Email: _____

Mailing Address: _____

Town: _____ Zip Code: _____ State: _____

Phone Number: _____

Are you a current or former employee of Veritas Care of Maine? Yes: ____ No: ____

Job title that you are applying for: _____

How did you hear about this position?: _____

Are you at least 18 years of age? Yes: ____ No: ____

Do you have a valid driver's license? Yes: ____ No: ____ State Issued: _____

Have you ever worked, attainted licensing or certification, attended school or been convicted of a criminal offense under a different name? Yes: ____ No: ____

If yes, list name(s) below:

Name 1: _____ Name 2: _____
Name 3: _____ Name 4: _____

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Only U.S. citizens or aliens who have a legal right to work and remain permanently in the U.S. are eligible for employment. Can you, after employment, submit verification of your legal right to work in the United States? Yes: _____ No: _____

Veritas Care of Maine conducts background checks

Have you ever been convicted of any violation of law by any court of law? Include any guilty pleas entered, military court martial, traffic violations or convictions for Operating Under the Influence (OUI), or traffic violations that resulted in your license being suspended. Do not include any juvenile adjudications or traffic violations listed above. Some positions require disclosure of juvenile adjudications. Applicants for these positions will be required to disclose juvenile adjudications on a supplemental form provided for that purpose. Please print your answer (either "Yes" or "No") in the space provided: _____

If yes, please list: Offense(s) Date of Convictions

_____

_____

_____

Not all conviction(s) or adjudication(s) will automatically disqualify you from employment but will be considered in relation to specific job requirements. Omission or misrepresentation of this information will result in employment ineligibility.

Please read and sign the following statement: I certify, under penalty of law, that the information given in this application and supporting documents (resume/cover letter etc.) is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show falsification, I will not be considered for employment or, if employed, I may be dismissed. I hereby authorize Veritas Care of Maine to whom my name is certified/referred to make all necessary investigations concerning me, my work habits, character, or my action in any transaction. I authorize Veritas Care of Maine to check my driving record if the position for which I am applying requires driving. I understand that I will be asked to submit to a pre-employment criminal history background check as a condition of employment. I authorize Veritas Care of Maine to receive and make available to other state agencies my academic records or other material pertinent to my qualifications, and further authorize and request each former employer, person given as reference, educational institution or organization (including law enforcement agencies) to provide all information that may be sought in connection with my application. I understand and agree that I will be required to ratify the information contained in this application by signature as a condition of employment.

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Please attach a cover letter and resume containing your work history (including month/year worked, full time or part time), and any additional documentation requested in the Job Bulletin -OR- Use the attached Employment-Education History form.

To evaluate your qualifications, please provide accurate and complete information regarding your education, previous job tasks, and levels of responsibility. Your qualifications may be based on relevant work history, to include part time, Temporary and Volunteer experience. Be thorough and specific in the detailing of duties. Please complete the form below (attach additional documentation if needed) or attach a resume containing your work history to include years worked at each employer.

Education

	Name and Location	Major	Minor	Graduate/Degree Type
High School				
College				
Grad School				
Other				

Licenses, Certifications and Registrations

Name of License, Certification or Registration	License Number	State of Issue	Expiration Date

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Employment History

Employer: _____Company Phone: _____

Address: _____

City/State/Zip Code: _____

Supervisor: _____ Phone Number: _____

Position Held: _____

Description of Duties: _____

_____

_____

_____

Start Date: _____ End Date: _____

Reason for Leaving: _____

Employer: _____Company Phone: _____

Address: _____

City/State/Zip Code: _____

Supervisor: _____ Phone Number: _____

Position Held: _____

Description of Duties: _____

_____

_____

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_____

_____

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_____

Professional References

Reference's Name: _____

Job Title: _____

Company Name: _____

Relationship to Application: _____

Contact Information Phone: _____

Contact Information Email: _____

Reference's Name: _____

Job Title: _____

Company Name: _____

Relationship to Application: _____

Contact Information Phone: _____

Contact Information Email: _____