



## HallKeen Assisted Living Communities LLC

1400 Providence Highway, Suite 1000 | Norwood, MA 02062  
781-762-4800

### APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, creed, religion, national origin, ancestry, citizenship, gender, age, marital or veteran status, sexual orientation, gender identity, disability, genetic information, or any other legally protected classification.

Applicants with a disability may be entitled to a reasonable accommodation under applicable law. Please inform our Human Resources Department if you need assistance completing any forms or to otherwise participate in the application process.

#### PERSONAL INFORMATION

Full Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street Apt City State Zip Code

Telephone incl. area code \_\_\_\_\_ Email \_\_\_\_\_  
Home Cell

Position Desired \_\_\_\_\_ Salary Desired \_\_\_\_\_ Date Available \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ May we contact your present employer? \_\_\_\_\_

Have you filed an application and/or been employed here before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes to either question, please give dates. \_\_\_\_\_

Do you have any friends, relatives, or acquaintances working for the company? Y \_\_\_\_\_ N \_\_\_\_\_

If yes, state their name & relationship. \_\_\_\_\_

How were you referred to this Company? \_\_\_\_\_

Are you legally eligible for employment in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

(You will be required to furnish proof of lawful work status if you are extended a job offer in accordance with the Immigration Reform and Control Act of 1986)

Will you work overtime? Yes \_\_\_\_\_ No \_\_\_\_\_

If hired, will you have transportation to/from work? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you able to perform the essential functions of the position for which you are applying, with or without reasonable accommodations? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are applying for any property maintenance position, please be advised that these positions require the lifting and/or moving of heavy equipment & appliances. Are you capable of lifting and/or moving heavy equipment and appliances? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you over the age of 18? Yes \_\_\_\_\_ No \_\_\_\_\_  
List below your work experience (starting with your present or most recent employer) for the last five years or your last three employers, whichever will provide us with the greatest information about you. You may include as part of your employment history any verified work performed on a volunteer basis. Use the reverse side of the application form if you need additional space. Please account for all periods of unemployment in this section.

Employer _____	Telephone _____
Address _____	Employed From _____ To _____
Name of Supervisor/Title _____	
Summarize work performed and job responsibilities: _____	
Reason for leaving:	

Employer _____	Telephone _____
Address _____	Employed From _____ To _____
Name of Supervisor/Title _____	
Summarize work performed and job responsibilities: _____	
Reason for leaving:	

Employer _____	Telephone _____
Address _____	Employed From _____ To _____
Name of Supervisor/Title _____	
Summarize work performed and job responsibilities: _____	
Reason for leaving:	

COMMENTS :

May we contact your present employer at this time? Yes \_\_\_\_ No \_\_\_\_

**EDUCATION**

Schools	Name & Address of School, and Telephone Number	Did You Graduate?	Course of Study
Graduate			
College			
Business/Trade Of Technical			
High School			

Membership in Professional or Civic organizations, which you consider relevant to your ability to perform the job. (Exclude those which may disclose your race, color, religion or national origin.)

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Please indicate any foreign languages you can speak, read or write, and also include your level of skill. \_\_\_\_\_

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**REFERENCES**

Please list of the name & telephone number of three references who are not related to you.

Name	Telephone	Occupation	Years Known

❖ IT IS UNLAWFUL IN MASSACHUSETTS TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. ANY EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

**PRE-EMPLOYMENT STATEMENT**

I have read and fully understand the questions asked in this application. I certify that all of the answers I have given are true, accurate and complete. I understand that the omission and/or misrepresentation of any fact from or on this application or during any interview will result in immediate rejection of my application or if I am hired will be cause for immediate dismissal. Unless I noted otherwise, I authorize HallKeen to contact all my employment references and personal references, as well as the education institutions I have attended. I further authorize HallKeen to inquire about, investigate and obtain copies of any records which relate to me from my former employers and educational institutions. I hereby release HallKeen and all affiliated persons and entities, as well as any person or institution that provides HallKeen with any lawful information about me, from any and all liability whatsoever resulting from any such lawful inquiry, investigation or communication.

If hired, I understand that my employment may be terminated with or without cause and with or without notice at any time, at the will of HallKeen or me. I further understand that no representative or agent of HallKeen, other than HallKeen's Vice President of Human Resources, is authorized to provide any employee or employees with an employment contract or special arrangement concerning terms or condition of employment and that any such agreement must be in writing and signed by HallKeen's Vice President of Human Resources. In addition, I understand that HallKeen and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms and conditions of employment.

I understand that any hiring decision is contingent upon my successful completion of all of HallKeen's lawful pre-employment checks, which may include a background check. I agree to execute any consent forms necessary for HallKeen to conduct its lawful pre-employment checks.

\_\_\_\_\_ Signature of Applicant

\_\_\_\_\_ Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_

Hired \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Date of Employment \_\_\_\_\_

Hourly Rate/Salary \_\_\_\_\_ Job Title \_\_\_\_\_ Department \_\_\_\_\_

Remarks: \_\_\_\_\_  
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\_\_\_\_\_  
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