



# Delta Health Center, Inc.

702 Martin Luther King Road • Mound Bayou, Mississippi 38762 • (662) 741-8800 • Fax (662) 741-2700

"Serving the Delta  
Since 1965"

## APPLICATION FOR EMPLOYMENT

Position Applied for: \_\_\_\_\_ Date: \_\_\_\_\_

### PERSONAL DATA

NAME: \_\_\_\_\_  
*Last, First, Middle I.*

ADDRESS: \_\_\_\_\_

(City, State, Zip) \_\_\_\_\_

Telephone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Are you legally eligible for employment in the U.S.? \_\_\_\_\_ Yes \_\_\_\_\_ No  
*(If yes, verification will be required)*

Have you filed an application with Delta Health Center before? \_\_\_\_\_ Yes \_\_\_\_\_ No

*(If yes, give month and year: \_\_\_\_\_)*

Have you ever been employed with Delta Health Center before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_

### RECORD OF EDUCATION

<i>School</i>	<i>Name and Address of School</i>	<i>Years Completed</i>	<i>Did You Graduate?</i>	<i>List Diploma or Degree</i>
High School	_____	_____	_____ Yes	_____
	_____	_____	_____ No	_____
	_____	_____	_____	_____
College	_____	_____	_____ Yes	_____
	_____	_____	_____ No	_____
	_____	_____	_____	_____
Other <i>(specify)</i>	_____	_____	_____ Yes	_____
	_____	_____	_____ No	_____
	_____	_____	_____	_____

**DHC Applicant Name:** \_\_\_\_\_  
 (Last name), (First name)

<b><u>Employment History:</u></b> List your last four (4) employers, assignments or volunteer activities starting with the most recent, including military experience. Explain gaps in employment in comments sections below.			
Employer	<b>Date Employed</b>		<b>Summarize the nature of work performed &amp; job responsibilities</b>
Telephone: ( ) -	From: / /	To: / /	
Address:	<b>Hourly Rate/Salary</b>		
Job Title:	Starting:	Final:	
Immediate Supervisor & Title:			
Reason for leaving:			
May we contact your employer?	Yes No Later		
Employer	<b>Date Employed</b>		<b>Summarize the nature of work performed &amp; job responsibilities</b>
Telephone: ( ) -	From: / /	To: / /	
Address:	<b>Hourly Rate/Salary</b>		
Job Title:	Starting:	Final:	
Immediate Supervisor & Title:			
Reason for leaving:			
May we contact your employer?	Yes No Later		
Employer	<b>Date Employed</b>		<b>Summarize the nature of work performed &amp; job responsibilities</b>
Telephone: ( ) -	From: / /	To: / /	
Address:	<b>Hourly Rate/Salary</b>		
Job Title:	Starting:	Final:	
Immediate Supervisor & Title:			
Reason for leaving:			

**An Equal Opportunity Employer**

**DHC Applicant Name:** \_\_\_\_\_  
*(Last name), (First name)*

<i>May we contact your employer?</i>		_____ <i>Yes</i> _____ <i>No</i> _____ <i>Later</i>	
<i>Employer</i>	<i>Date Employed</i>		<i>Summarize the nature of work performed &amp; job responsibilities</i>
<i>Telephone:</i> ( ___ ) ___ - ____	<i>From:</i> ___/___/___	<i>To:</i> ___/___/___	
<i>Address:</i>	<i>Hourly Rate/Salary</i>		
<i>Job Title:</i>	<i>Starting:</i>	<i>Final:</i>	
<i>Immediate Supervisor &amp; Title:</i>			
<i>Reason for leaving:</i>			
<i>May we contact your employer?</i>		_____ <i>Yes</i> _____ <i>No</i> _____ <i>Later</i>	

**PERSONAL REFERENCES**

List three (3) business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

<u>Name</u>	<u>Address</u>	<u>Telephone</u>

**MILITARY SERVICE RECORD**

Were you in U.S. Armed Forces? \_\_\_\_\_ *Yes if yes, what branch?* \_\_\_\_\_ *No*

Did you receive any training in the U.S. Armed Forces that is relevant to the position applied for?

**OTHER**

Have you ever been convicted for a crime, excluding misdemeanors and summary offenses, in the past ten (10) years which has not been annulled or expunged or sealed by a court?

\_\_\_\_\_ *Yes* \_\_\_\_\_ *No (If yes, describe in full: \_\_\_\_\_)*

Have you ever been bonded? \_\_\_\_\_ *Yes* \_\_\_\_\_ *No (If yes, on what job: \_\_\_\_\_)*

**State name(s) of relatives and friends working for us other than your spouse:**

DHC Applicant Name: \_\_\_\_\_  
(Last name), (First name)

**PLEASE READ AND SIGN BELOW**

**It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.**

**I give the Employer the right to investigate all references and to secure additional information about me that is job related. I hereby release from liability the Employer and its representatives from seeking such information and all other persons corporations or organizations for furnishing such information.**

**The Employer is an equal opportunity employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state or federal law.**

**This application is current for only sixty (60) days. At the conclusion of this time, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary for me to fill out a new application.**

**Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_**

DHC Applicant Name: \_\_\_\_\_  
 (Last name), (First name)

**APPLICANT – Do Not Write On This Page.**

**FOR INTERVIEWER’S USE**

<u>Interviewer</u>	<u>Date</u>	<u>Comments</u>

**FOR TEST ADMINSTRATOR’S USE**

<u>Tests Administered</u>	<u>Date</u>	<u>Raw Score</u>	<u>Rating</u>	<u>Comments &amp; Interpretation</u>

**REFERENCE CHECK**

<u>Position Number</u>	<u>Results of Reference Check</u>	<u>Position Number</u>	<u>Results of Reference Check</u>
I		V	
II		IV	
III		VII	
IV		VIII	