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The Ursuline Center of Toledo

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Social Security No.: _____

Position Applied for: _____

How did you learn of the position? _____

Are you available to work: Full Time _____ Part Time _____ Shift Work _____
 Temporary _____?

Please answer the following questions by checking the appropriate box	Yes	No
Are you 18 years of age or older?		
If not can you provide proof of your eligibility to work?		
Have you ever filed an application with us? If so, provide date:		
Have you ever been employed with us? If so, provide dates:		
Are you currently employed?		
May we contact your current employer?		
Are you prevented from lawfully becoming employed in this country because of Visa or immigration status? (Proof of immigration status will be required upon employment.)		
Are you currently on "lay-off" status and subject to recall?		
Can you travel if a job requires it?		
Do you have reliable transportation?		
Have you ever been discharged from employment for absenteeism, misconduct, or poor performance? If yes explain:		

<i>Continue from above if needed:</i>		
Have you ever been convicted of a misdemeanor? (Conviction may not impact hiring decision) If yes, explain:		
Have you ever been convicted of a felony? (Conviction may not impact hiring decision). If yes, please explain:		
Have you had any job-related training in the US military? If yes, explain:		
Have you ever been debarred or excluded from any federally funded health care program? If yes, explain:		
Are you physically able, with or without accommodation, to perform the duties of the job for which you are applying?		
On what date are you available to begin work?		

Education

Grade School: _____ Address: _____

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Describe any other awards, achievements, special skills, certifications, apprentice skills and or extra-curricular activities you feel we should know about:

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Employment Disqualifying Offenses

- (a) 2903.01 (aggravated murder)
- (b) 2903.02(murder)
- (c) 2903.03 (voluntary manslaughter)
- (d) 2903.04 (involuntary manslaughter)
- (e) 2903.11 (felonious assault)
- (f) 2903.12 (aggravated assault)
- (g) 2903.13 (assault)
- (h) 2903.16 (failing to provide for a functionally-impaired person)
- (i) 2903.21 (aggravated menacing)
- (j) 2903.34 (patient abuse or neglect)
- (k) 2905.01(kidnapping)
- (l) 2905.02(abduction)
- (m) 2905.11 (extortion)
- (n) 2905.12 (coercion)
- (o) 2907.02 (rape)
- (p) 2907.03 (sexual battery)
- (q) 2907.05 (gross sexual imposition)
- (r) 2907.06 (sexual imposition)
- (s) 2907.07 (importuning)
- (t) 2907.08 (voyeurism)
- (u) 2907.09 (public indecency)
- (v) 2907.12 (felonious sexual penetration)
- (w) 2907.25 (prostitution; after positive HIV test)
- (x) 2907.31 (disseminating matter harmful to juveniles)
- (y) 2907.32 (pandering obscenity)
- (z) 2907.321 (pandering obscenity involving a minor)
- (aa) 2907.322 (pandering sexually-oriented matter involving a minor)
- (bb) 2907.323 (illegal use of a minor in nudity-oriented material or performance)
- (cc) 2911.01 (aggravated robbery)
- (dd) 2911.02 (robbery)
- (ee) 2911.11 (aggravated burglary)
- (ff) 2911.12 (burglary)
- (gg) 2911.13 (breaking and entering)
- (hh)2913.02 (theft)
- (ii) 2913.03 (unauthorized use of a vehicle)
- (jj)2913.04 (unauthorized use of property; computer, cable or telecommunication property)
- (kk) 2913.11 (passing bad checks)
- (ll) 2913.21 (misuse of credit cards)
- (mm) 2913.31 (forgery; identification card offenses)
- (nn) 2913.40 (Medicaid fraud)
- (oo) 2913.43 (securing writings by deception)
- (pp) 2913.47 (insurance fraud)
- (qq) 2913.51 (receiving stolen property)
- (rr) 2919.25 (domestic violence)
- (ss) 2921.36 (illegal conveyance of weapons or prohibited items onto grounds of detention facility or institution)
- (tt) 2923.12 (carrying concealed weapons)
- (uu) 2923.13 (having weapons while under disability)
- (vv) 2923.161 (improperly discharging firearm at into habitation or school safety zone)
- (ww) 2925.03 (corrupting another with drugs)
- (xx) 2925.11 (possession of drugs)
- (zz) 2925.13 (permitting drug use)
- (aaa) 2925.22 (deception to obtain a dangerous drug)
- (bbb) 2925.23 (illegal processing of drug documents)
- (ccc) 3716.11 (placing harmful objects in food or confection)

I certify that I have not been convicted of or pled guilty to any of the above disqualifying offenses from the Ohio Revised Code. In addition, I have listed below any other felony or misdemeanor convictions or guilty pleas other than minor traffic citations. A conviction will not necessarily disqualify you from employment.

Employee Signature

Date

Witness Signature

Date

Ursuline Center of Toledo Applicant Reference Form

Applicant name:		Date
Position Applying for:		
By signing below I fully release the Ursuline Center to contact my previous employers and references as noted on my application.		
Applicant Signature:		Date:

Name of Reference			
Signature		Date	
Company			
Position Held:			
Address:		Phone	Fax

Applicant's dates of employment:	From:	To:
Applicant's Job title:		
What position did the applicant hold in your company?		
Theoretically, would you re-employ applicant?		

	Excellent	Good	Satisfactory	Below Average	Poor
Quality of Work					
Attendance/Absenteeism					
Honesty/Integrity					
Ability to problem solve					
Interactions with others					
Overall Performance					

Signature of staff member completing this form: _____ Date: _____