## **B & D Staffing Solutions- DNA Serenity Home Care**

## **Application For Employment** We are an equal opportunity employer and committed to excellence through diversity. The application must be fully completed to be considered. Please complete each section even if you attach a resume. **Personal Information** Name Address City State Zip Phone number Email address Are you legally eligible to work in the US? Are you a veteran? Yes $\square$ No $\square$ Yes $\square$ No $\square$ If selected for employment, are you willing to submit to a background check? No $\square$ Yes $\square$ **Position** Available Start ☐ Per Diem Position you are applying for: Date: ☐ Part Time ☐ Full Time □ APRN □ RN □ LPN □ NA □ TECH □ HHA □ Clerical □ Administrative ☐ Seasonal OTHER Temporary ☐ Contract **Area of specialty:** ☐ Travel □ ICU □ Medsurg □ Telemetry □ ED □ Ortho □ Rehab/Long Term are. ☐ Dialysis ☐ IR ☐ Cath Lab ☐ OR ☐ Mental Health ☐ Oncology ☐ Pediatric ☐ Outpatient/Ambulatory $\square$ BLS $\square$ ACLS $\square$ PALS \_State: \_\_ Licensed Number: List all states/Territories you have ever Registered as a $\Box$ RN/ $\Box$ APRN/ $\Box$ NA Registration Number: \_\_\_\_\_ Expiration Date: Do you have pending, or have you ever had any registration practice revoked suspended restricted probation or voluntary relinquished? ☐ No if yes explain: \_\_\_\_\_ $\square$ Yes **Employment History**

## **B & D Staffing Solutions- DNA Serenity Home Care**

Employer (1)	Job title	Dates employed		
Work phone	Starting pay rate		Ending pay rate	
Address	City State		Zip	
Employer (2)	Job title	Dates employed		
Work phone	Starting pay rate	Ending pay rate		
Address	City	State	Zip	
Employer (3)	Job title	Dates employed		
Work phone	Starting pay rate	Ending pay rate		
Address	City	State	Zip	
Employer (4)	Job Title		Dates employed	
Work phone	Starting pay rate		Ending pay rate	
Address	City	State	Zip	
Employer (5)	Job title		Dates employed	
Work phone	Starting pay rate	Ending pay rate		

## **B & D Staffing Solutions- DNA Serenity Home Care**

Address		City		State		Zip			
Education									
School Name	Loca	tion	Years Atte	Years Attended Do		ceived	Major		
References (Business and Professional Only)									
Name	Title		Company				Phone		
Signature-Disclaimer									
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 employment being terminated.  Name (please print)  Signature									
Date									
AUTHODIZATION FOR DELEASE OF INFORMATION									
AUTHORIZATION FOR RELEASE OF INFORMATION									
In order for B&D Staffing Solutions LLC- DNA Serenity Home Care to assess and verify my educational									
background, professional qualifications and suitability for employment: I Authorize B&D Staffing Solutions &									
DNA Serenity Home Care to make inquiries concerning such information about me to my previous employer(s),									
current employer, educational institutions, State licensing boards, other professional organizations and/or persons,									
agencies, organizations or institutions listed by me as references, and to any other appropriate sources to whom									
B&D Staffing Solutions DNA Serenity Home Care may be referred by those contacted or deemed appropriate;									
Authorize release of such information and copies of related records and/or documents to B&D Staffing Solutions									
LLC- DNA Serenity Home Care . Release from liability all those who provide information to B&D Staffing Solutions LLC in good faith and without malice in response to such inquiries; and Authorize B&D Staffing Solutions LLC- DNA									
Serenity Home Care to disclose to such persons, employers, institutions, boards, or agencies identifying and other									
information about me to enable B									
Name:	• • • • • • • • • • • • • • • • • • • •								