

Date:

Name:

Northside *Employment Application*

Northside is an affiliate company of the Genesis HealthCare System. Our Mission... to provide compassionate quality health care.

We define our Values as... Patience, respect for customers, respect for staff, respect for self, continued self improvement/education, cooperation, trust, dependability, good communications, understanding, and empathy.

Our Vision is... to be preferred for the quality of our products and services by individuals, institutions, and businesses; regarded for the excellence of our staff, and recognized for the effective use of our resources.

Thank you for your interest in employment with Northside. We strive to achieve an environment that reflects the mission and values of this organization. Applicants should demonstrate a willingness to be responsive to customer needs, to assist others, and contribute to the team effort. Please complete the application thoroughly. State your interests and qualifications clearly and completely. Feel free to add any information you think may be helpful. Northside is committed to being an equal opportunity employer. Selections of applicants for employment are based only on qualifications and the requirements of a specific job. A resume may be attached to this completed application.



Please submit application to: Northside Maysville Pharmacy
Human Resources Office
1132 Taylor Avenue • Zanesville, Ohio 43701

www.northsideRx.com
An Equal Opportunity Health Care Provider and Employer

*Northside Pharmacies and
Oxygen & Medical Equipment*

1 Your Current Information

Social Security No. _____ Phone (Home) _____

Name _____ E-mail Address _____

Present Address _____ City _____ Zip _____

Previous Address _____ City _____ Zip _____

County _____ Alternate Phone _____

Are you at least 18 years old? Yes No

Are you authorized to work in the U.S. under present immigration laws? Yes No If no, explain _____

Have you ever been employed by Northside, Bethesda Care System, Good Samaritan Medical Center, or Genesis?

Yes No If yes, position held and department _____

Dates of employment from _____ to _____ Reason for leaving _____

Have you ever been *convicted* of any violation of law by civilian or military court other than for a minor traffic offense, *regardless of date of conviction*? Yes No If yes, please explain _____

Have you ever been involuntarily terminated or involuntarily dismissed from a former position or job? Yes No

If yes, please explain _____

(NOTE: Conviction of a crime or involuntary termination is not an automatic bar to employment; all circumstances will be considered.)

Please list any immediate relatives who work for Northside or Genesis HealthCare System _____

Do you have reliable transportation to work? Yes No

How did you happen to apply with us? Ad Northside Reputation School Agency

Referral? By whom _____ Other _____

2 Career Preferences

Type of work or position(s) applying for include...

(1) _____

(2) _____

(3) _____

Employment Status Desired

Full-time

Part-time

On-call

What shifts (hours) would you be available to work? Please circle all that apply...

Days Evenings Weekends Rotation

Do you have a minimum salary requirement? Yes No If yes, indicate salary _____

3 Your Education

Circle year of high school completed... 9 10 11 12

College, technical or other training... 1 2 3 4 5

Are you a high school graduate or GED/equivalent? Yes No

EDUCATION BACKGROUND	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	TYPE OF DEGREE
HIGH SCHOOL			
COLLEGE			
GRADUATE SCHOOL			
BUSINESS/TRADE			

SPECIALIZED TRAINING, APPRENTICESHIPS AND EXTRACURRICULAR ACTIVITIES

(exclude those which may be indicative of sex, age, race, color, religion, military status, disability or national origin)

LICENSURE/REGISTRATION/CERTIFICATION INFORMATION

Professional License No./State _____ Expiration Date _____

Registration No./State _____ Expiration Date _____

Certification No./State _____ Expiration Date _____

BUSINESS OFFICE SKILLS

Typing _____ WPM

Word processing/software programs in which you are proficient _____

Equipment you have skills to use _____

4 Professional References

List three persons, not related to you or a clergy person, who have known you for at least one year. Do not list former employers or supervisors who will be listed in your Employment History section.

1 Name _____ Occupation _____

Address _____ Telephone (H) _____ (W) _____

2 Name _____ Occupation _____

Address _____ Telephone (H) _____ (W) _____

3 Name _____ Occupation _____

Address _____ Telephone (H) _____ (W) _____

5 Employment History

List previous employment experience beginning with the **most recent or present** employer. All information **must** be completed. A resume **may not** be used in place of this information.

Most Recent or Current Employer:

1

Company Name _____ Type of Business _____
Address _____ Supervisor's Name _____
Telephone _____ Your Position _____
Reason for Leaving _____ Dept. _____ Duties _____
Last Wage _____ Dates employed from _____ to _____
Is this job Full-time Part-time Casual

2

Company Name _____ Type of Business _____
Address _____ Supervisor's Name _____
Telephone _____ Your Position _____
Reason for Leaving _____ Dept. _____ Duties _____
Last Wage _____ Dates employed from _____ to _____
Was this job Full-time Part-time Casual

3

Company Name _____ Type of Business _____
Address _____ Supervisor's Name _____
Telephone _____ Your Position _____
Reason for Leaving _____ Dept. _____ Duties _____
Last Wage _____ Dates employed from _____ to _____
Was this job Full-time Part-time Casual

Indicate by number any of the above you prefer us NOT to contact: (please circle) 1 2 3
Otherwise, I voluntarily give Northside permission to investigate my past work history.

All employment offers are made following successful results of pre-employment testing, drug screening, reference checks and background investigational checks. If I accept employment at Northside, I understand and agree that any misrepresentation or omission of facts called for in my application will render my application void, bar me from any future employment with Northside, and/or result in my immediate separation from Northside. I understand that my employment is at will and may be terminated either by me or by Northside at any time with or without notice for any reason.

I understand that no employee of Northside has the authority to alter my at-will employment status or the policies of Northside, (with which I agree to comply in consideration of my employment if I am employed), except the Director, who may only do so in writing.

Date _____ Signature _____

This application will be considered active for one year, after which you must reapply.

