



RENAISSANCE
— SENIOR LIVING —

Employment Application

Renaissance Senior Living

21903 W National Ave, New Berlin WI 53146

sheila@rslmemorycare.com

Renaissance Senior living is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact the company representative.

Please fill out all sections below

Date _____

Applicant information:

Name _____

Address _____

City, state, and zip code _____

Telephone Number _____

Email Address _____

Employment Position

Position Applying for _____

How did you hear about this position?

What days are you available to work?

What shifts are you able to work?

On what date can you start working if hired?

Salary Desired Hourly _____

Personal Information

Have you ever applied at Renaissance Senior Living? Yes No

If Yes, when?

Do you have any friends, relatives, or acquaintances working for Renaissance Senior Living?

Yes ___ No ___

If yes, state name and

relationship _____

Are you 18 years or older? Yes ___ No ___

Are you a U.S. citizen or eligible to work in the United States? Yes ___ No ___

Job Skills/Qualifications

Please list below the skills and qualifications you possess for the position for which you are applying :

High School
Name

Location

Year Graduated

Degree Earned

College/University/Vocational School
Name

Location

Year Graduated

Degree Earned

Previous Employment

Employer Name - May we contact for reference check? Yes ___ No ___

Employer address

Job Title

Supervisor Name

Employer telephone

Dates Employed

Reason for Leaving

Employer Name - May we contact for reference check? Yes__ No__

Employer address

Job Title

Supervisor Name

Employer telephone

Dates Employed

Reason for Leaving

Employer Name - May we contact for reference check? Yes__ No__

Employer address

Job Title

Supervisor Name

Employer telephone

Dates Employed

Reason for Leaving

References

Please provide 3 Professional or personal references
Name and phone number

1

2

3

Additional Information

Are you CBRF Certified in Wisconsin? Yes__ No__

Date of initial certification_____

Standard Precautions____ Fire Safety____ First Aid & Choking____

Medication Administration____

Are you a Certified Nursing Assistant? Yes____ No____

Date of initial certification_____

At - Will Employment

The relationship between you and Renaissance Senior Living is referred to as “employee at will”this means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or Renaissance Senior Living. No representative of Renaissance Senior Living has the authority to enter into any agreement contrary to the foregoing “employment at will” relationship. You understand that your employment is “at will” and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Company Owner.

Applicant

Signature:_____

Dated:_____