STANFORD LODGE

409 Naomi Street
Plainwell, MI 49080
Telephone (269) 685-5821
FAX (269) 685-5796

Assisted Living
Leigh A. Larson
Corporate President
Mark A. Larson
Corporate Secretary

AUTHORIZATION FOR RELEASE OF EMPLOYMENT INFORMATION

I have made application for employment with Stanford Lodge and desire that they be fully informed as to my previous employment and/or academic records. I hereby authorize any former employer and school counseling official to release to Stanford Lodge any information contained in my employment and/or school records upon request. I specifically waive prior or subsequent written notice of disclosure of record information including disciplinary reports, letters of reprimand or other disciplinary action. I also release my former employers and schools from all claimed liability arising out of such response and disclosure.

PRINT NAME	SOCIAL SECURIT
APPLICANT SIGNATURE	DATE
May we contact your present/past employer fo	or a reference? Yes No_
For Office Use Only	

APPLICATION FOR EMPLOYMENT (Please Print All Information)

Name	Cit.	7in
Address	City_	ZIP
Are you 18 years of age or olde		Citizen?
Check which shifts you are willing	na to work - First Sec	and Third
Full Time Part Time	On Call	Summer
Have you ever been convicted of	of a felony? Yes	No
Have you ever been convicted of Have you received an specialize	ed training applicable to emp	loyment in Adult Foster
Care? Yes No	If yes, explain:	-
Are you currently licensed, Reg	istered or Certified for health	care in MI?
-		
EDUCATION AND TRAINING		
High School	Date:	Diploma:
College	Date:	Diploma:
CollegeOther School	Date	Diploma:
Other School	Date	Dipionia
WORK EXPERIENCE (List last	or present position first)	
		Dates:
Employer:		
Phone #:	Contact Person_	Detect
Employer:	Position:	Dates
Phone # :Employer:	Contact Person_	
Employer:	Position:	Dates:
Phone # :	Contact Person	
List any special skills or experie	ence:	
Criminal background check is a	required for all employees	upon hire and random drug
•	oquilou ioi all ombioyood	apon into and random arag
screening.		
Certification for Stanford Lodge	e :	
I hereby affirm that the informa	ition provided on this appli	cation (an accompanying
resume) is true and complete t		
information, representations or		
for employment and may resul	t in discipline or dismissal	if discovered at a later date.
authorize a thorough investiga	tion of my past employme	ent and education, including
discipline records, and agree t	100	
	•	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
iability and responsibility all pe	•	- 31-1-1 (a) (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
equesting or supplying such in	nformation and waive any	right to notice of such
disclosure.		
113UU3U16.		
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Signature:	Date:	