



Broadview, Inc. is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, ancestry, age, sex, marital status, national origin, disability or veteran status.

Broadview's mission is to support healing through its Christian Science nursing ministry.

APPLICATION FOR EMPLOYMENT

Date: _____

PERSONAL

Please complete the entire application.

NAME _____
Last First Middle

ADDRESS _____
Number & Street Apartment number

CITY _____ STATE _____ ZIP _____

PHONE _____ SOCIAL SECURITY NUMBER _____

POSITION DESIRED _____ FULL TIME PART TIME

DATE AVAILABLE TO START _____ SALARY RANGE DESIRED _____

E-MAIL ADDRESS _____

ARE YOU OVER 18 YEARS OLD? YES NO

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES YES NO
(If offered employment, you will be required to provide documentation to verify eligibility.)

BROADVIEW IS A 24-HOUR NURSING FACILITY WITH ROUND-THE-CLOCK SHIFTS.
PLEASE INDICATE THE SHIFTS INCLUDING DAYS, NIGHTS, WEEKENDS & HOLIDAYS FOR WHICH YOU ARE AVAILABLE.

ARE YOU AVAILABLE TO WORK OVERTIME, IF APPLICABLE? YES NO

WHO REFERRED YOU TO OUR COMPANY? _____

DO YOU HAVE FRIENDS OR RELATIVES WHO WORK HERE? IF YES, PLEASE LIST NAME & RELATIONSHIP BELOW:

HAVE YOU EVER BEEN BONDED? YES NO IF YES, WITH WHICH EMPLOYERS?

BROADVIEW IS RECOGNIZED BY THE COMMISSION FOR ACCREDITATION OF CHRISTIAN SCIENCE NURSING ORGANIZATIONS/FACILITIES, INC. AND MAY, BY LAW, APPLY THE TEST OF RELIGIOUS QUALIFICATION TO ALL APPLICANTS FOR EMPLOYMENT.

WHAT IS YOUR RELIGIOUS DENOMINATION OR AFFILIATION? _____

FOR CHRISTIAN SCIENTISTS ONLY:

ARE YOU A MEMBER OF THE MOTHER CHURCH? YES NO IF YES, WHAT YEAR? _____

ARE YOU A MEMBER OF A BRANCH CHURCH? YES NO

IF YES, WHICH ONE? _____

HOW HAVE YOU SERVED IN YOUR BRANCH CHURCH & WHAT BRANCH CHURCH ACTIVITIES ARE YOU CURRENTLY INVOLVED IN?

ARE YOU LIVING IN ACCORD WITH STANDARDS SET FORTH IN THE MANUAL? YES NO

HAVE YOU TAKEN CHRISTIAN SCIENCE CLASS INSTRUCTION? YES NO

IF YES, WHAT YEAR? _____ TEACHER NAME & LOCATION _____

FOR WHAT PURPOSE & HOW DO YOU STUDY THE BIBLE LESSON?

WHAT CHRISTIAN SCIENCE PERIODICALS DO YOU CURRENTLY SUBSCRIBE TO & REGULARLY READ? (*See The Mother Church Manual, 44:16*)

PLEASE RELATE A CHRISTIAN SCIENCE HEALING THAT YOU YOURSELF HAVE EXPERIENCED.

EDUCATION & SKILLS

HIGH SCHOOL

Number of years completed (circle one) 1 2 3 4

Diploma YES NO **G.E.D.** YES NO

School _____ City/State _____

COLLEGE OR VOCATIONAL SCHOOL

Number of years completed (circle one) 1 2 3 4

School _____ City/State _____

Major _____ Degree Earned _____

OTHER TRAINING OR DEGREES

School _____ City/State _____

Course _____ Degree or Certificate Earned _____

WHAT OTHER BACKGROUND EXPERIENCES, SPECIAL SKILLS TRAINING OR TALENTS DO YOU HAVE THAT, YOU FEEL, WILL CONTRIBUTE SPECIFICALLY & BENEFICIALLY TO YOUR WORK HERE, IF HIRED? *Please indicate proficiency level for any skills listed - i.e. proficient, knowledgeable, novice)*

PLEASE LIST ANY AWARDS, COMMENDATIONS, OR SPECIAL ACKNOWLEDGEMENTS HAVE YOU RECEIVED IN THE LAST 5 YEARS.

REFERENCES

Please list three personal references not related to you. Additionally, applicants who are applying for a nursing position, should list personal references who are also active Christian Science church members.

Name		Address		City/State/Zip	
Telephone	Email	Relationship		How long known?	
Name		Address		City/State/Zip	
Telephone	Email	Relationship		How long known?	
Name		Address		City/State/Zip	
Telephone	Email	Relationship		How long known?	

EMPLOYMENT HISTORY

Please list your work experience for the past ten years beginning with your most recent job held. If you were self-employed, please give the name of your company.

<i>Company Name</i>	<i>Telephone</i>
<i>Address</i>	<i>Employed (Month/Year)</i> <i>From: To:</i>
<i>Supervisor's Name</i>	
<i>Job Title & Duties</i>	<i>May we contact employer?</i> <input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>

<i>List any advancements/promotions while you worked here:</i>	<i>Reason for Leaving (please be specific):</i>
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<i>Company Name</i>	<i>Telephone</i>
<i>Address</i>	<i>Employed (Month/Year)</i> <i>From: To:</i>
<i>Supervisor's Name</i>	
<i>Job Title & Duties</i>	<i>May we contact employer?</i> <input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>

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<i>Supervisor's Name</i>	
<i>Job Title & Duties</i>	<i>May we contact employer?</i> <input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>

<i>List any advancements/promotions while you worked here:</i>	<i>Reason for Leaving (please be specific):</i>
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PLEASE EXPLAIN ANY GAPS IN EMPLOYMENT HISTORY:

PLEASE PROVIDE ANY OTHER INFORMATION THAT YOU BELIEVE SHOULD BE CONSIDERED, INCLUDING WHETHER YOU ARE BOUND BY ANY AGREEMENT WITH ANY CURRENT EMPLOYER.

CERTIFICATION & AUTHORIZATION FOR EMPLOYMENT APPLICATION

I certify that the information provided on this application is truthful & accurate. I understand that providing false or misleading information will be the basis for rejection of my application or, if employment commences, immediate termination.

I authorize Broadview, Inc. to contact former employers & educational organizations regarding my employment & education information. Additionally, I authorize my former employers & educational organizations to fully & freely communicate information regarding my previous employment/attendance/grades, & those persons designated as references to fully & freely communicate information deemed pertinent to providing character reference.

If hired, I understand that my employment is “at-will” & that either I or Broadview, Inc. is able to terminate the employment relationship at any time, with or without cause. Moreover, no agent, representative, or employee of Broadview, Inc., except in a specific written contract of employment signed on behalf of the organization by its Executive Director, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION & I UNDERSTAND & AGREE TO ITS TERMS.

Applicant Signature

Date