



Maple Lawn Associates, Inc.

2394 Black Dog Road
McAlisterville, PA 17049
Fax #: 717-463-9292
Phone #: 717-463-2342

Please return applications to Human Resources via USPS at the address listed to the left, via fax to 717-463-9292, or via email at clarissa@maplelawnassociates.com.

Employment Application

Dear applicant, it is the policy of Maple Lawn Associates, Inc. to provide equal employment opportunities to all applicants and employees without regard to status such as race, religion, color, gender (including pregnancy, gender identity, and sexual orientation), parental status, national origin, age, disability, family medical history or genetic information, political affiliation, military service, or other non-merit based factors. **Please complete the application in its entirety and return it to us.**

Personal Information

Name (Last, First, MI)

Street Address

City, State, Zip

Number of years at the above address

Home Phone Number

Cell Phone Number

E-mail Address

Social Security Number

Driver's License Number/State/Expiration

Employment Desired

Position applied for Full time Part time Temporary

List any relatives or friends working for Maple Lawn Associates:

Date available for work

How many days would you be available to work?

Wage Desired \$ _____ per

Education

	Name and Address of School	Course of Study	Total Years of Study	Degree/Diploma
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

List any seminars, awards, honors, special achievements, classes, or other education not listed above which may help qualify you for this position (if you need additional space, please use page 4):

Employment History

List below all present and past employers over the past ten (10) years, starting with your **most recent** employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

May we contact your current employer? Yes No

Are you currently on layoff from your employer and subject to recall? Yes No

Employer Name (current <input type="checkbox"/> Yes <input type="checkbox"/> No)	Start Date	End Date	Essential job functions of final position 1.
Street Address	Starting Salary \$	Ending Salary \$	2.
City, State, Zip	Job position(s)		3.
Phone number	Supervisor(s)		4.
Fax number	E-mail address of supervisor		
Reason(s) for leaving			
What value did you add to this company or its customers?			

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Reason(s) for leaving

What value did you add to this company or its customers?

References

Please provide one **work**, one **character** and one **personal** reference.

Name	Occupation	
Company Name	Address	
Telephone Number	E-Mail Address	Relationship / Years Acquainted

Name	Occupation	
Company Name	Address	
Telephone Number	E-Mail Address	Relationship / Years Acquainted

Name	Occupation	
Company Name	Address	
Telephone Number	E-Mail Address	Relationship / Years Acquainted

Additional Space (Additional space provided to expand on any points or questions asked previously in this application)

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Driver's Accident Record for the past 3 years or more (if you need additional space, please use page 4) If none, write "None"

DATES		NATURE OF ACCIDENT (HEAD-ON, REAR-END, UPSET, ETC.)	FATALITIES	INJURIES
LAST ACCIDENT				
NEXT PREVIOUS				
NEXT PREVIOUS				

Traffic Convictions and forfeitures for the past 3 years (other than parking violations) If none, write "None"

LOCATION	DATE	CHARGE	PENALTY

Additional Information

If hired, are there any accommodations the company would need to provide so that you can perform all the essential functions and duties of the position being applied for? Yes No

If yes, please explain:

If you are under 18 years of age, can you provide proof of your eligibility to work? Yes No

If hired, can you provide proof of U.S. citizenship or proof of your legal right to work in the U.S.? Yes No

Driving may be a requirement for some positions with Maple Lawn Associates. Have you in the last 7 years been convicted of driving under the influence (DUI)? Yes No

If hired, do you have a reliable means of transportation to and from work? Yes No

Have you ever been convicted of a felony or misdemeanor? Yes No

If Yes, please explain:

TO BE READ AND SIGNED BY APPLICANT

Please read each statement closely and initial each to acknowledge your understanding.

Equal Employment Opportunity Statement

_____ Maple Lawn Associates, Inc. is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. Maple Lawn Associates, Inc. desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, gender (including pregnancy, gender identity, and sexual orientation), parental status, national origin, age, disability, family medical history or genetic information, political affiliation, military service, or other non-merit based factors. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for Maple Lawn Associates, Inc.

Discrimination and Sexual Harassment Policy Statement

_____ Maple Lawn Associates will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, request for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

Disclosure to Applicants Concerning Drug/Alcohol Testing

_____ If you are offered a position with Maple Lawn Associates, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

Complete and Accurate Information

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection or this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

At-Will Employment

_____ I understand and agree that if I am employed, my employment will be "at-will", which means that Maple Lawn Associates may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, Maple Lawn Associates will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superseded and that no promise or representation contrary to the foregoing is binding on Maple Lawn Associates unless made in writing and signed by Maple Lawn Associates CEO.

Testing Authorization

_____ If offered a position with the Maple Lawn Associates, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by Maple Lawn Associates as a condition of employment.

Investigation Authorization

_____ I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

Company Obligation

_____ I understand and agree that Maple Lawn Associates acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that Maple Lawn Associates is under no obligation to hire me as the result of accepting this completed application.

I have read and understand the above policy statements and agree to be bound by them if employed by Maple Lawn Associates.

Applicant's Signature

Date

Applicant (Print Name)