

Labette Center for Mental Health Services, Inc.
 1730 Belmont, PO Box 258
 Parsons, KS 67357
 620-421-3770

Employment Application

Applicant Note: Labette Center for Mental Health Services, Inc. is an Equal Opportunity Employer. Prospective employees will receive consideration without discrimination based on sex, marital status, race, color, age, creed, national origin, sexual orientation, military or disability status.

Date of application		How did you hear about this job opening		
Last Name	First Name	M.I.	Social Security Number	
Street Address		City	State	Zip Code
Telephone	Alt. Phone		Position applied for	
Date you are available to start	Have you applied with Labette Center before? Yes No If so, when		Are you at least 18 years of age or older?	

Education

Grade Level	Name/Location	Did you graduate	Degree/diploma
High School			
College			
Military/Other			
Graduate			

Employment

Dates Month/Year	Name/Location/Phone Number of Employer	Ending Wage	Position and Duties	Reason for Leaving
From				
To				
From				
To				
From				
To				

References: Please list 3 business references. If you do not have 3, include personal references.

Name	Relationship	Phone Number	Address

Skills and abilities: Please list below special skills, experiences, or qualifications you feel apply to the position in which you are interested.

Please read carefully before signing

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Labette Center for Mental Health Services, Inc that such employment is at will, for no specified duration and may be terminated by either Labette Center or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements Labette Center or its representatives used during the employment process is deemed a contract of employment real or implied.

In consideration for employment with Labette Center, if employed, I agree to conform to the rules, regulations, policies and procedures at all times and understand that such obedience is a condition of employment. I understand that due to the nature of Labette Center business, attendance and punctuality are considered essential requirements of every job, and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with Labette Center, I will be required to submit to a drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employments tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Labette Center for Mental Health Services, Inc and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

By signing below I acknowledge that I have read, understood, and agree to the above statements.

Signature

Date

For employer use only:

Interviewed by	Date
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