



APPLICATION FOR EMPLOYMENT

Facility: (check one): ___ Homestead ___ Haman Ranch ___ Both / Either

The Mannheimer Foundation, Inc. (herein also referred to as the "Foundation" or "MF") provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

How did you hear about us? ___ Online ___ Friend / Acquaintance ___ Relative / Family

If referred by an MF employee, please provide the name: _____

Position Applying for: _____ Date available to start: _____

Desired salary range: _____ ___ full time ___ part time

PERSONAL INFORMATION:

Do you have a valid drivers license (DL)? Yes No DL# _____ State _____ Exp. date _____

Do you have a valid Social Security Number (SSN)? Yes No _____ SSN (card or copy will be examined)

Name: _____ Last Middle (if any) First

Address: _____ Street City State Zip

Contact: _____ Phone email (if available)

Have you ever been known by a different name? Please describe if yes: _____

BASIC ELIGIBILITY QUESTIONS:

- Are you 18 years of age or older? ___ Yes ___ No
Can you furnish proof of employment authorization in the US? ___ Yes ___ No
Do you have reliable transportation to and from work? ___ Yes ___ No
Are you willing to undergo background check? ___ Yes ___ No
Are you willing to take a drug test? ___ Yes ___ No
Are you willing to go through medical screening? ___ Yes ___ No
Are you willing to work the required schedule? ___ Yes ___ No
Are you willing to work weekends and holidays on rotation? ___ Yes ___ No



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EDUCATION / CERTIFICATIONS (write "N/A" if not applicable or available):

Do you have a high school diploma or GED ___ Yes ___ No Year completed: _____

Name & location of School: _____

List any license or certifications: _____

Professional membership or affiliation: _____

Subjects of special study or research work: _____

Medical or veterinary training and/or education: _____

Read	Write	Speak	Listening	} English language communication
Minimal <input type="checkbox"/>	Minimal <input type="checkbox"/>	Minimal <input type="checkbox"/>	Minimal <input type="checkbox"/>	
Moderate <input type="checkbox"/>	Moderate <input type="checkbox"/>	Moderate <input type="checkbox"/>	Moderate <input type="checkbox"/>	
Functional <input type="checkbox"/>	Functional <input type="checkbox"/>	Functional <input type="checkbox"/>	Functional <input type="checkbox"/>	
Fluent <input type="checkbox"/>	Fluent <input type="checkbox"/>	Fluent <input type="checkbox"/>	Fluent <input type="checkbox"/>	

EMPLOYMENT HISTORY (List in chronological order - start with most recent. Write "N/A" if not applicable or available):

From (Month/Year): _____	To (Month/Year): _____
Employer: _____	Location (City, State, Zip): _____
Position: _____	Job Duties: _____

From (Month/Year): _____	To (Month/Year): _____
Employer: _____	Location (City, State, Zip): _____
Position: _____	Job Duties: _____

From (Month/Year): _____	To (Month/Year): _____
Employer: _____	Location (City, State, Zip): _____
Position: _____	Job Duties: _____



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References (Must be Professional, Business or Work reference known for at least 1 year - Not personal or relatives:

Name	Phone	How do you know this person?
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Name	Phone	How do you know this person?
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Name	Phone	How do you know this person?
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APPLICANT STATEMENT & CERTIFICATION:

I give the Foundation permission to contact and obtain information from all references, employers, schools, and to verify the accuracy of the information in this application. I hereby release the Foundation and its representatives from liability for seeking, gathering, and using such information and all other persons, corporations or organizations for furnishing such information.

I understand, that if I am employed, any misrepresentation or material omission made by me on this application may be sufficient cause for immediate termination, whenever it is discovered.

I also understand that if I am hired I will be required to provide proof of identity and legal authorization to work in the United States and that federal laws require me to complete an I-9 Form in this regard.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice. The employer reserves the right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law.

This application does not constitute an agreement or contract for employment for any specific period or definite duration. I understand that no representative of the employer other an authorized officer has the authority to make any assurances to the contrary.

I certify that I have read and fully understand the above and seek employment under these conditions.

Signature of Applicant: _____

Date: _____



APPLICATION FOR EMPLOYMENT

Background check and pre-employment verification is an integral part of screening and hiring process at the Foundation. All candidates / applicants must agree and provide legible copy of their Drivers License or State issued ID as well as a valid Social Security number in order to proceed further.

APPLICANT CONSENT FOR BACKGROUND CHECK AND PRE-EMPLOYMENT VERIFICATION

I certify and declare under penalty of perjury under relevant state and federal law that the information contained herein is complete, true and accurate. I acknowledge that falsification or omission of information may result in immediate dismissal or retraction of any offer of employment.

In consideration of The Mannheimer Foundation Inc. review of my application for employment, I hereby voluntarily consent to and authorize the Foundation or its authorized agents bearing this release or copy thereof to obtain a consumer report for employment purposes.

I understand and acknowledge that this consumer report and background check may include any of the following:

- » Criminal and Civil Records
- » Motor Vehicle Records
- » Military Service Verification
- » Credential Verification
- » Education Verification
- » Employment Verification
- » Personal Identity Verification
- » Past Employment Verification
- » Reference Checks
- » Credit Report
- » Animal Rights Activism/Extremism
- » Known Affiliates
- » Social Media
- » Open Source Information

I hereby authorize all persons and/or organization to release information pertaining to and in the course of my background check or pre-employment verification initiated by the Foundation. I hereby release any persons or organization providing information from all claims and liabilities of any nature in connection with this background check and/or pre-employment verification. I hereby further authorize a copy of this signed authorization may be considered as valid as the original.

Signature of Applicant: _____

Date: _____

To be completed by Mannheimer Staff only - Application Received By:

Name: _____ Signature: _____ Date: _____