

WELCOMING SENIORS OF ALL FAITHS SINCE 1896

# Central Baptist Village Application for Employment



Central Baptist Village  
4747 N. Canfield Avenue | Norridge, Illinois 60706  
(708) 583-8500  
[www.cbvillage.org](http://www.cbvillage.org)



# Central Baptist Village Employment Application



In order to be considered for employment, this application must be filled out completely.

Once completed and signed, please scan and email this application to: [employment@cbvillage.org](mailto:employment@cbvillage.org)

If you are unable to email this application, please submit in person or mail to:

4747 N. Canfield Avenue, Norridge, Illinois 60706

**Application Date:** \_\_\_\_\_

## 1. Applicant Personal Information

Full Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Social Security Number \_\_\_\_\_

Are you legally authorized to work in the United States?  Yes  No

Will you now or in the future require visa sponsorship for employment with Central Baptist Village?  Yes  No

*New hires will be required to complete Form I-9 Employment Eligibility Verification and provide documents establishing identity and lawful ability to work in the US.*

If you are under 16 years old, can you furnish a work permit?  Yes  No

## 2. Work Desired

What position(s) are you interested in? Check all that apply:

- |  |  |  |                                |
|--|--|--|--------------------------------|
| <input type="checkbox"/> Nurse           | <input type="checkbox"/> Social Services | <input type="checkbox"/> Resident Services | <input type="checkbox"/> Other |
| <input type="checkbox"/> CNA             | <input type="checkbox"/> Culinary Aide   | <input type="checkbox"/> Maintenance       |                                |
| <input type="checkbox"/> Life Enrichment | <input type="checkbox"/> Cook            | <input type="checkbox"/> Housekeeping      |                                |

If other, please specify:

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Do you want a part-time or full-time position? Check all that apply:

- Part-Time       Full-Time

What shift(s) can you work? Check all that apply:

- |                                    |   |                                    |
|------------------------------------|---|------------------------------------|
| <input type="checkbox"/> 1st Shift | <input type="checkbox"/> 2nd Shift      | <input type="checkbox"/> 3rd Shift |
| <input type="checkbox"/> Weekends  | <input type="checkbox"/> Rotating Shift | <input type="checkbox"/> On Call   |

What are your long-term career goals:

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Please feel free to make any other comments you feel are pertinent to your application.

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## 3. Education

High School / Location \_\_\_\_\_

Years Attended \_\_\_\_\_

Field of Study \_\_\_\_\_

Diploma?  Yes     No

College / Location \_\_\_\_\_  
Years Attended \_\_\_\_\_  
Field of Study \_\_\_\_\_  
Degree?  Yes  No If yes, specify: \_\_\_\_\_

Other / Location \_\_\_\_\_  
Years Attended \_\_\_\_\_  
Field of Study \_\_\_\_\_  
Degree?  Yes  No If yes, specify: \_\_\_\_\_

#### 4. Employment History

Are you currently employed?  Yes  No If yes, may we contact your current employer?  Yes  No  
Have you ever been fired from a job?  Yes  No  
If yes, why? \_\_\_\_\_

**Employer 1** Is this your current employer?  Yes  No

Company Name \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Position / Title \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Last Salary \_\_\_\_\_  
Immediate Supervisor Name \_\_\_\_\_ Phone \_\_\_\_\_

#### Employer 2

Company Name \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Position / Title \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_ Last Salary \_\_\_\_\_  
Immediate Supervisor Name \_\_\_\_\_ Phone \_\_\_\_\_

### Employer 3

Company Name \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Position / Title \_\_\_\_\_

Reason for Leaving \_\_\_\_\_ Last Salary \_\_\_\_\_

Immediate Supervisor Name \_\_\_\_\_ Phone \_\_\_\_\_

### 5. Skills / Licensure

Are you professionally licensed or certified?  Yes  No

Type of License \_\_\_\_\_

Number \_\_\_\_\_ State Issued \_\_\_\_\_

Computer Skills  None  Fair  Good

Keyboard Skills  None  Fair  Good

What software programs are you proficient in?

\_\_\_\_\_

List any equipment that you can operate that may relate to this position.

\_\_\_\_\_

List any special training you've received that is applicable for the position.

### 6. References

How did you hear about CBV and/or the open position?

Online / Website  Other, please specify: \_\_\_\_\_

Walk-In  Current Employee (please add details below)

Current Employee

Name \_\_\_\_\_ Department \_\_\_\_\_

Do you have relatives or friends employed by CBV?  Yes  No If yes, specify below:

Name \_\_\_\_\_ Department \_\_\_\_\_

Name \_\_\_\_\_ Department \_\_\_\_\_

### 3 Professional References

Name 1 \_\_\_\_\_

Title \_\_\_\_\_ Company \_\_\_\_\_

Phone \_\_\_\_\_ When did you work together? \_\_\_\_\_

Relationship:  Direct Supervisor  Co-Worker  Other

If other, please explain:

Name 2 \_\_\_\_\_

Title \_\_\_\_\_ Company \_\_\_\_\_

Phone \_\_\_\_\_ When did you work together? \_\_\_\_\_

Relationship:  Direct Supervisor  Co-Worker  Other

If other, please explain:

Name 3 \_\_\_\_\_

Title \_\_\_\_\_ Company \_\_\_\_\_

Phone \_\_\_\_\_ When did you work together? \_\_\_\_\_

Relationship:  Direct Supervisor  Co-Worker  Other

If other, please explain:

### 7. Certification

May we run a detailed employment check, including but not limited to a check with your employer?

Yes  No

I, (print name) \_\_\_\_\_ hereby certify that the information contained in this application is true and correct and I authorize CBV representatives to contact any of my schools, former employers or other references unless otherwise stated. I understand that if I am employed, any misrepresentation of facts as stated or implied on this application form is sufficient cause for dismissal. This agreement does not bind either party for any specific period regarding employment.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

# Central Baptist Village

## Application for Employment

Once completed and signed, please scan and email this application with a copy of your resume to:  
**employment@cbvillage.org**

If you are unable to email this application, please submit in person or mail to:  
**4747 N. Canfield Avenue, Norridge, Illinois 60706**

*Central Baptist Village provides equal employment opportunities to all applicants for employment without regard to race, color, religion, sex, national origin, age, genetic makeup, disability, sexual orientation, gender identity, military status or military discharge status, pregnancy, childbirth and related conditions or any other protected status all in accordance with applicable local, state and federal laws.*



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