



# Orchard Manor - Grant County Application for Employment

THIS FACILITY  
MAY DO  
DRUG TESTING

Position Applying For \_\_\_\_\_

Position Type (please circle) Full-time, Regular Part-time, Part-time, PRN

Date of Application \_\_\_\_\_

The following information is requested in order to help us make the best possible placement with Orchard Manor. All portions of this application pertaining to you must be completed. Orchard Manor does not discriminate on the basis of age, race, religion, color, sex, national origin, marital status, disability, sexual orientation or any other characteristic protected by law.

**PERSONAL DATA:**

Name _____	Former Name _____
Last                                  First                                  Initial	Home phone (    ) _____
Address _____	Other phone (    ) _____
Street/PO Box	Email address _____
City                                  State                                  Zip Code	

Are you over the age of 18?  Yes  No  
 If no, are you over the age of 16?  Yes  No  
 Are you legally eligible for employment in the United States?  Yes  No  
 Were you previously employed here?  Yes  No  
 If yes, please list the departments and dates: \_\_\_\_\_

Have you ever been convicted of a crime other than minor traffic violations?  Yes  No  
 (A criminal record will be considered only as it relates to the job applied for.)  
 If yes, please explain: \_\_\_\_\_

Are you related to any employee at Orchard Manor?  Yes  No  
 If yes, please list his/her name and your relationship.  
Name of employee: \_\_\_\_\_ Relationship to employee (please circle): Friend / Relative

Have you worked for a WRS (Wisconsin Retirement System) participant in the past? ?  Yes  No

**EDUCATION AND TRAINING:**

School	Name and Location	(Optional) Dates Attended From:          To:	Course of Study and Degree	Graduated
High School/GED		<del>_____</del>		<input type="checkbox"/> Yes <input type="checkbox"/> No
College or University		_____ MO YR    MO YR		<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School		_____ MO YR    MO YR		<input type="checkbox"/> Yes <input type="checkbox"/> No
Business, Trade, Vocational or Other		_____ MO YR    MO YR		<input type="checkbox"/> Yes <input type="checkbox"/> No

Are you now a licensed or certified member of any profession or trade?  Yes  No  
 If yes, give type of license or certificate, number and year issued and expiration date: \_\_\_\_\_

Have you ever received a reprimand or had your license revoked?  Yes  No  
 If yes, why? \_\_\_\_\_

EMPLOYMENT RECORD:

Please complete by beginning with last or current employer, then next to last, etc. If you were employed under a different name, please give the name used.

If currently employed, may we contact that employer?  Yes  No

Employer	Phone	Dates of Employment	
		From	To
Address	Salary (Optional)	Hours/Week	Supervisor
Reason for Leaving	Job Title		
Description/Duties			

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(Use a separate sheet for additional employers.)

MILITARY SERVICE RECORD:

Have you ever been in the armed forces?  Yes  No

If yes, what branch? \_\_\_\_\_

Dates of duty: From \_\_\_\_\_ To \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_

Type of Discharge: \_\_\_\_\_

What were your duties in the service (include special training and duty station)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REFERENCES:

List persons who are familiar with your qualifications and background. (No relatives)

	Name	Email Address / Phone Number	Business or Occupation
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

SUMMARY

Please summarize any special skills or qualification you have acquired that will support your application for this position.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE READ THE PARAGRAPHS BELOW BEFORE SIGNING:

CERTIFICATE OF APPLICANT: I hereby certify that all statements made on or in connection with this application are true, complete and correct to the best of my knowledge and belief, and I understand and agree that any misstatements or omissions of material fact herein subjects me to disqualification or dismissal. I understand that employment with Orchard Manor is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at anytime with or without cause.

I authorize all Persons, Schools, Companies, Corporations, Municipalities, Agencies, or other Organizations to give to Orchard Manor any information requested concerning my employment, character, experience, and qualifications and/or suitability for employment with Orchard Manor, including a check of my fingerprints, motor vehicle record and criminal record for the purpose of considering my suitability for hire. I hereby forever release, discharge, and covenant not to sue any person or organization for any result of providing, obtaining, or acting upon such information. I agree to release all parties from all claims under any laws, including civil rights information. I agree to release all parties from all claims under any laws, including civil rights laws, arising from providing and receiving such information. I understand that such information is sought with confidentiality and will not be released to me in any form whatsoever.

I understand that Orchard Manor is committed to maintain a drug-free workplace. Orchard Manor may require a drug test as a part of the hiring process. Orchard Manor may conduct post-accident, reasonable suspicion, periodic and/or random drug or alcohol testing to its employees.

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

OPTIONAL:

I request that my employment application and all related references and documents remain confidential to the extent allowed by Wisconsin Statutes since they would tend to reveal my identity.

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

**Submit completed application to:**

Attn: Human Resources  
Orchard Manor  
8800 Hwy 61  
Lancaster, WI 53813

Email: [employment@co.grant.wi.gov](mailto:employment@co.grant.wi.gov)  
Fax: (608)723-2210; (608)723-4595  
Phone: (608)723-2113; (608)723-2540

**If submitting your application materials via US Mail, please make sure you have enough postage as to not cause delay in processing.**

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**How did you hear about this employment opportunity?**

- Facebook ([www.facebook.com/GrantCountyEmploymentOpportunities](http://www.facebook.com/GrantCountyEmploymentOpportunities))
- Shopping News
- Other Newspaper: \_\_\_\_\_
- Grant County Website ([www.co.grant.wi.gov](http://www.co.grant.wi.gov) [www.co.grant.wi.gov/docs\\_by\\_cat\\_type.asp?doccatid=111&locid=147](http://www.co.grant.wi.gov/docs_by_cat_type.asp?doccatid=111&locid=147))
- Orchard Manor Website ([www.omanor.com](http://www.omanor.com))
- Job Center of Wisconsin Website ([www.jobcenterofwisconsin.com](http://www.jobcenterofwisconsin.com))
- School
- Posting or email at my place of employment
- Friend / Relative
- Other: \_\_\_\_\_