

It is the policy of Bradford County Manor to consider all applicants for employment without regard to age, race, color, national origin, sex, ancestry, religion, or handicap; also affirmative action will be taken to employ and advance in employment qualified handicapped individuals who, with reasonable accommodation, can perform the functions of a job

PLEASE PRINT

- DOWNLOAD PDF DOCUMENT TO YOUR DESKTOP BY RIGHT CLICKING AND SELECTING "SAVE AS" OR BY CLICKING THE "DOWNLOAD ARROW".
- COMPLETE FORM IN ADOBE READER OR ACROBAT
- ONCE COMPLETED SUBMIT FORM VIA EMAIL TO BCMRECRUITER@BRADFORDCO.ORG

PERSONAL DATA	Name			Date of Application							
				e-mail:							
	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border: none;"><i>Last</i></td> <td style="text-align: center; border: none;"><i>First</i></td> <td style="text-align: center; border: none;"><i>Middle</i></td> <td colspan="2" style="border: none;"></td> </tr> </table>			<i>Last</i>	<i>First</i>	<i>Middle</i>			Telephone or Number where you can be reached:		
	<i>Last</i>	<i>First</i>	<i>Middle</i>								
	Address										
	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border: none;"><i>No. Street</i></td> <td style="text-align: center; border: none;"><i>City</i></td> <td style="text-align: center; border: none;"><i>State</i></td> <td style="text-align: center; border: none;"><i>Zip Code</i></td> <td colspan="2" style="border: none;"></td> </tr> </table>			<i>No. Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>			Social Security Number	
	<i>No. Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>							
	Have you lived in a state other than Pennsylvania in the last two years? If so, name the state										
	Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, hire is subject to verification that you are a minimum legal age.										
	If hired, can you provide the documents required to prove that you are authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No										
	Please provide any additional information we need about your name to verify your employment/education record.										
	Military Experience <input type="checkbox"/> Yes <input type="checkbox"/> No		Branch	Yrs. Of Service	Rate or Rank	Type of Discharge					
	Since the age of 18, have you ever been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No										
	ALL APPLICANTS ARE REQUIRED TO SUBMIT TO A CRIMINAL HISTORY REPORT										
	<p>According to Pennsylvania State Law (Act 13) a conviction of one or more of the crimes listed on the enclosed page of this application (Prohibitive Offenses Contained in Act 196 of 1996 as Amended by Act 13 of 1997, PA Department of Aging, April, 1998) may preclude you from employment at the Bradford County Manor. Please review this list carefully before completing an application for employment.</p> <p>Pennsylvania State Law (Act 13) requires all persons to submit a report of criminal history record information from the State Police or a statement from the State Police that their repository contains no such information. If you have a current background check response, kindly attach it to the completed application. If you do not have a current background check, a Request for Criminal Record Check form must be completed on the first day of employment.</p> <p>If you are not now a resident of the Commonwealth of Pennsylvania or have not been a resident of the Commonwealth of Pennsylvania for the two years immediately preceding this application, you are required to submit a report of Federal Criminal History Record information in addition to the Pennsylvania State Policy CHRI. Please contact the Personnel Office for further information on how to obtain a Federal Criminal History Record. <i>A form requesting Federal Criminal History Record information must be completed on the first day of employment. If this provision is not met within 90 days of employment, the employee will be terminated.</i></p> <p>To applicants who desire entrance into the Nurse Assistant Training Program, a completed CHRI Report must be on file at Bradford County Manor before entrance into the program is granted.</p> <p>All other employees are hired on a 30-day provisional basis (90 days if non-Pennsylvania resident). If it is found that the employee is disqualified because of a conviction listed on the enclosed sheet, the employee will be immediately discharged from employment with Bradford County Manor.</p>										
Position applied for			How did you learn of this employment opportunity?								
Have you ever been employed by this facility or Bradford County? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where?											
Are you interested in <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Occasional What is your shift preference?											
If your position includes rotating shifts, including weekends and holidays, are you available for the position? <input type="checkbox"/> Yes <input type="checkbox"/> No											
Date available for employment				Salary desired \$							

EDUCATION	Schools & Location	Degree	Did you graduate?	Courses or Major
	High School			
	College or University			
	Other			
Nurse Aide Training Course	How many hours did you complete?	Are you certified? <u>Yes</u> <u>No</u>		

PROFESSIONAL REGISTRATION(S), LICENSURE(S)

State	Number	State	Year Received	Expiration Date

LIST ALL POSITIONS IN CHRONOLOGICAL ORDER WITH MOST RECENT EMPLOYMENT FIRST

EMPLOYMENT RECORD	Date Employed		1)Employer's Name, Address & Telephone No.	Title & Duties	
	Mo.	Yr.			
	From	To			
	Starting Position				
	Final Position		Supervisor's Name & Title	Reason for Leaving	Base Salary
	Date Employed		2)Employer's Name, Address & Telephone No.	Title & Duties	
	Mo.	Yr.			
	From	To			
	Starting Position				
	Final Position		Supervisor's Name & Title	Reason for Leaving	Base Salary
	Date Employed		3)Employer's Name, Address & Telephone No.	Title & Duties	
	Mo.	Yr.			
From	To				
Starting Position					
Final Position		Supervisor's Name & Title	Reason for Leaving	Base Salary	

May we contact the employers listed above? Yes No If No, indicate by number which one you do not wish us to contact _____

Have you ever been disciplined or fired? No Yes If Yes, explain: _____

REFERENCES	GIVE NAME OF THREE PERSONS, NOT RELATIVES OR FORMER SUPERVISORS			
	Name	Address/Telephone No.	Occupation	Years Known

SIGNATURE	<p>I certify that the information submitted by me in this application and during any personal interview is true and complete to the best of my knowledge. I understand that any false information provided in this application or during any personal interview shall be considered sufficient cause for denial of my application or, if I am employed, for termination of employment. I hereby authorize you to make any investigation of any information provided on this application unless noted otherwise. I understand that all information released will be held in strict confidence and I hereby release Bradford County Manor and the previous employer, school, and/or personal references from any liability for damages resulting directly or indirectly from such disclosures. I understand that my employment is contingent upon receipt of a current physical exam, drug and alcohol test and Mantoux test. I also understand that, should I become employed by this facility, my employment and compensation can be terminated with or without cause, at any time, at the option of either this facility or myself. I further understand that if employed, my employment shall not be treated as a contractual relationship. I agree to comply with the regulations, policies, and philosophies of this facility and the Department in which I am employed as they may exist and be amended from time to time.</p>
	<p>Signature of Applicant _____ Date _____</p>

I have applied for employment and am aware that if hired I must show proof that I have applied for the required criminal record information and that I have provided a copy of my criminal record information request to officials at Bradford County Manor.

I hereby swear or affirm that I am not disqualified from employment because of my conviction of one or more of the crimes listed on the enclosed page.

I further understand that my hiring is provisional for a single period not to exceed 30 days (90 days if I am a non-Pennsylvania resident) and that if it is found that I am disqualified from employment that I will be immediately discharged from employment with Bradford County Manor.

Applicant Signature Date _____

Pennsylvania Residency and Criminal History Record Information/Verification

_____ has been a resident of Pennsylvania continuously for ____ years.
(Applicant Name)

I verify that the statement made in this verification and application is true and correct. I understand that false statements could prevent my employment at Bradford County Manor. I understand that the number of years as a Pennsylvania resident is needed for accurate Criminal History Record Information purposes.

Signature

Date

REQUEST FOR VERIFICATION OF EMPLOYMENT

The individual named below has made application for employment with Bradford County Manor. We would appreciate your assistance. Please verify dates of employment, and the job title or description. Please feel free to use the back of this page to include information you think might be of value in our decision to employ the applicant, and sign the bottom of the form. Feel free to make any corrections or notations, as you deem necessary. For your convenience, this form can be faxed to Carol Sue McNeal, Personnel Assistant, at (570) 297-3634.

APPLICANT INFORMATIONTo be completed by Applicant**

Name: _____

Social Security Number: _____

Dates of Employment: _____ To _____

Former Employer: _____

Job Description or Title: _____

By my signature I request that any of my previous employers confirm the above information and further request that my previous employers provide any information in my personnel file to Bradford County Manor that may be useful in determining my qualification and fitness for employment. I give Bradford County Manor permission to photocopy this form with my signature to distribute the form to any former employer as they see fit.

Signature of Applicant: _____

EMPLOYER'S SIGNATURE:	
TITLE:	
PHONE:	DATE:

OLDER ADULTS PROTECTIVE SERVICES ACT

Prohibitive Offenses Contained in Act 169 of 1996 as Amended by Act 13

May 2011
Dept. of Aging

Following Offenses as Contained in PA Crimes Code (18 Pa. C.S.)

Offense Code	Prohibitive Offense Description	Type/Grading of Conviction
CC2500	Criminal Homicide	Any
CC2502A	Murder I	Any
CC2502B	Murder II	Any
CC2502C	Murder III	Any
CC2503	Voluntary Manslaughter	Any
CC2504	Involuntary Manslaughter	Any
CC2505	Causing or Aiding Suicide	Any
CC2506	Drug Delivery Resulting in Death	Any
CC2702	Aggravated Assault	Any
CC2901	Kidnapping	Any
CC2902	Unlawful Restraint	Any
CC3121	Rape	Any
CC3122.1	Statutory Sexual Assault	Any
CC3123	Involuntary Deviate Sexual Intercourse	Any
CC3124.1	Sexual Assault	Any
CC3125	Aggravated Indecent Assault	Any
CC3126	Indecent Assault	Any
CC3127	Indecent Exposure	Any
CC3301	Arson and Related Offenses	Any
CC3502	Burglary	Any
CC3701	Robbery	Any
CC3901	Theft	<div style="border: 1px solid black; padding: 10px; text-align: center;"> <p>Any ONE (1) FELONY or TWO (2) MISDEMEANORS within the 3900 Series (CC3901-CC3934)</p> </div>
CC3921	Theft By Unlawful Taking	
CC3922	Theft By Deception	
CC3923	Theft By Extortion	
CC3924	Theft By Property Lost	
CC3925	Receiving Stolen Property	
CC3926	Theft of Services	
CC3927	Theft By Failure to Deposit	
CC3928	Unauthorized Use of a Motor Vehicle	
CC3929	Retail Theft	
CC3929.1	Library Theft	
CC3929.2	Unlawful Possession of Retail or Library Theft Instruments	
CC3929.3	Organized Retail Theft	
CC3930	Theft of Trade Secrets	
CC3931	Theft of Unpublished Dramas or Musicals	
CC3932	Theft of Leased Properties	
CC3933	Unlawful Use of a Computer	
CC3934	Theft From a Motor Vehicle	
CC4101	Forgery	Any
CC4114	Securing Execution of Documents by Deception	Any
CC4302	Incest	Any
CC4303	Concealing Death of a Child	Any
CC4304	Endangering Welfare of a Child	Any
CC4305	Dealing in Infant Children	Any
CC4952	Intimidation of Witnesses or Victims	Any
CC4953	Retaliation Against Witness or Victim	Any
CC5902B	Promoting Prostitution	Felony
CC5903C	Obscene or Other Sexual Materials to Minors	Any
CC5903D	Obscene or Other Sexual Materials	Any
CC6301	Corruption of Minors	Any
CC6312	Sexual Abuse of Children	Any

*Offenses as Contained in PA Controlled Substance, Drug, Device & Cosmetic Act (P.L. 233, No. 64)-PARTIAL LISTING**

Offense Code	Prohibitive Offense Description	Type/Grading of Conviction
CS13A12	Acquisition of Controlled Substance by Fraud	Felony
CS13A14	Delivery by Practitioner	Felony
CS13A30	Possession with Intent to Deliver	Felony
CS13A35 (i), (ii), (iii)	Illegal Sale of Non-Controlled Substance	Felony
CS13A36	Designer Drugs	Felony
CS13Axx*	ANY OTHER FELONY DRUG CONVICTION APPEARING ON PA RAP SHEET	

Nurse Aide Resident Abuse Prevention Training Act 14 of 1997 (P.L. 169)

Prohibitive Offenses Contained in 63 P.S. § 675

In no case shall an applicant for enrollment in a State-approved nurse aide training program be approved for admission into such program if the applicant’s criminal history record information indicates the applicant has been convicted of any of the following offenses:

- (1) An offense designated as a felony under the act of April 14, 1972 (P.L. 233, No. 64), known as “The Controlled Substance, Drug, Device and Cosmetic Act.” (See 35 P.S. § 780-101 *et seq.*)¹
- (2) An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:

Offense Code	Prohibitive Offense Description	Type/Grading of Conviction
CC2501	Criminal Homicide	Any
CC2502	Murder	Any
CC2503	Voluntary Manslaughter	Any
CC2504	Involuntary Manslaughter	Any
CC2505	Causing or Aiding Suicide	Any
CC2506	Drug Delivery Resulting in Death	Any
CC2507	Criminal Homicide of Law Enforcement Officer	Any
CC2702	Aggravated Assault	Any
CC2901	Kidnapping	Any
CC2902	Unlawful Restraint	Any
CC3121	Rape	Any
CC3122.1	Statutory Sexual Assault	Any
CC3123	Involuntary Deviate Sexual Intercourse	Any
CC3124.1	Sexual Assault	Any
CC3125	Aggravated Indecent Assault	Any
CC3126	Indecent Assault	Any
CC3127	Indecent Exposure	Any
CC3301	Arson and Related Offenses	Any
CC3502	Burglary	Any
CC3701	Robbery	Any
CC3901	Theft	1 Felony or 2 Misdemeanors
CC3921	Theft by Unlawful Taking	1 Felony or 2 Misdemeanors
CC3922	Theft by Deception	1 Felony or 2 Misdemeanors
CC3923	Theft by Extortion	1 Felony or 2 Misdemeanors
CC3924	Theft by Property Lost	1 Felony or 2 Misdemeanors
CC3925	Receiving Stolen Property	1 Felony or 2 Misdemeanors
CC3926	Theft of Services	1 Felony or 2 Misdemeanors
CC3927	Theft by Failure to Deposit	1 Felony or 2 Misdemeanors
CC3928	Unauthorized Use of a Motor Vehicle	1 Felony or 2 Misdemeanors
CC3929	Retail Theft	1 Felony or 2 Misdemeanors
CC3929.1	Library Theft	1 Felony or 2 Misdemeanors
CC3929.2	Unlawful Possession of Retail or Library Theft Instruments	----- 2 Misdemeanors
CC3929.3	Organized Retail Theft	1 Felony or 2 Misdemeanors
CC3930	Theft of Trade Secrets	1 Felony or 2 Misdemeanors
CC3931	Theft of Unpublished Dramas or Musicals	1 Felony or 2 Misdemeanors
CC3932	Theft of Leased Properties	1 Felony or 2 Misdemeanors
CC3934	Theft From a Motor Vehicle	1 Felony or 2 Misdemeanors
CC4101	Forgery	Any
CC4114	Securing Execution of Document by Deception	Any
CC4302	Incest	Any
CC4303	Concealing Death of a Child	Any
CC4304	Endangering Welfare of a Child	Any
CC4305	Dealing in Infant Children	Any
CC4952	Intimidation of Witnesses or Victims	Any
CC4953	Retaliation Against Witness or Victim	Any
CC5902B	Promoting Prostitution	Felony
CC5903C or D	Obscene and Other Sexual Materials and Performances	Any
CC6301	Corruption of Minors	Any
CC6312	Sexual Abuse of Children	Any

Any (1) F or (2) M's within the 3900 Series (CC3901-CC3934)

- (3) A Federal or out-of-State offense similar in nature to those crimes listed under paragraphs (1) and (2) above.

For questions pertaining to codes, offenses, or convictions, contact PA Department of Education at (717) 772-0814 or ra-natcep@pa.gov.

¹ These offenses could be designated as “CS” on a criminal rap sheet.
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