



Heartland Pharmacy

Employment Application form 2014a

Ammon Boise Denver

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Wage: _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO
**Must provide proof of authorization to work in the U.S. **

Have you ever worked for this company? YES NO If yes, when? _____

Did an existing employee refer you? YES NO If yes, employee's name: _____

Education

Check box if information is included on resume then proceed to next section

High School: _____ Did you graduate? YES NO

College: _____ Did you graduate? YES NO

Other: _____ Did you graduate? YES NO

References

Please list three manager/supervisor references to contact

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____



Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Check box if information is included on resume then proceed to next section

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____



Disclaimer, Information, and Acknowledgements

Information to the applicant: As part of our procedure for processing your employment application, your personal and employment references may be contacted. Pre-employment back-ground checks may be performed. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job.

U.S. Citizenship and Immigration Services, Department of Homeland Security requires proof of authorization to work in the US. Two forms of approved documentation is required. The applicant will be given information in accordance with the Homeland Security requirements of approved documents.

The applicant may be required to provide a copy of their driving record from the local Department of Motor Vehicles. If the driving record is required for the position being applied for, this expense is the applicant's responsibility.

If this application leads to employment, **you are required to complete and pass a mandatory pre-employment drug test.** Heartland Pharmacy will provide the necessary documentation and cost in order complete this mandatory requirement.

NOTE - Colorado Applicants: "It is a misdemeanor for any person who is a habitual user of any controlled substance defined in section 18-18-102 (5), C.R.S., to drive a motor vehicle, vehicle, or low-power scooter in this state." "Driving under the influence means driving a motor vehicle or vehicle when a person has consumed alcohol or one or more drugs..." as defined in section 18-18-102 (5) C.R.S. Prescription controlled substance drugs are defined according to Colorado Law as "habitual".

If this applicant is applying for a position that requires driving, please review and consider carefully the above information as defined by Colorado Law in determining ability in passing the mandatory pre-employment drug test.

Applicant Acknowledgements:

1. The information provided on this application is true and complete to the best of my knowledge. I understand that misrepresentation of information considered relevant may result in disqualification of my application or, if discovered after employment begins, termination of my employment.
2. I authorize present and former employers and those individuals listed as references to provide information about my employment record, including verification of my job title, job duties, dates of employment, compensation, job performance and reason for termination, thereby releasing them from any and all liabilities for damages, including disqualification of my application or termination of my employment arising from information provided by them in good faith.
3. Heartland Pharmacy does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.
4. I understand that employment with Heartland Pharmacy is "at-will" as provided by State law. Heartland Pharmacy or its employees have the right to end the employment relationship at any time, with or without advance notice, for any lawful reason. Neither this application nor any verbal statements made by management are intended to constitute a contract of employment, either express or implied, for any duration of time.

Signature: _____ Date: _____

Please Print Name: _____