



SCOTTSDALE TRAINING & REHABILITATION SERVICES  
7507 E. OSBORN ROAD  
SCOTTSDALE, AZ 85251  
480-994-5704

## APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or Veteran status, the presence of a non-job-related medical condition or disability or legally protected status.

**(PLEASE PRINT)**

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

Position(s) Applied For \_\_\_\_\_

Referral Source:  Ad \_\_\_\_\_  Friend  Relative  Walk-in  
 Other \_\_\_\_\_  STARS Staff (Name) \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone ( ) \_\_\_\_\_ Alternate Message Phone ( ) \_\_\_\_\_

E-mail address \_\_\_\_\_

To maintain our contract status with various state and/or federal agencies, the following questions are required for positions that involve operating a vehicle as part of the essential functions of this position.

Do you meet STARS driver requirements? (At least 21 years old, No DWI/DUI in the past 5 years, not more than 2 minor moving violations or one chargeable accident in the past 3 years, current Arizona Drivers License or ability to obtain an Arizona License if hired.)  YES  NO

Have you filed an application with STARS before?  YES  NO If YES, give date \_\_\_\_\_

Have you ever been employed by STARS before?  YES  NO If YES, give date \_\_\_\_\_

Date available for work? \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Work preference: Check all that apply.  Full Time  Part Time  Shift Work  Temporary

Have you ever been convicted of a felony or misdemeanor?  YES  NO.  
(Conviction will not necessarily disqualify applicant from employment.)

**AN EQUAL OPPORTUNITY EMPLOYER**

## EMPLOYMENT EXPERIENCE

Start with your present or last job include military service assignments and volunteer activities. You may exclude organization names, which indicate race, color, religion, gender, national origin, handicap or protected status.

<b>EMPLOYER</b>	TELEPHONE # ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK YOU PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RATE/SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	PER	
<b>EMPLOYER</b>	TELEPHONE # ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK YOU PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RATE/SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	PER	
<b>EMPLOYER</b>	TELEPHONE # ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK YOU PERFORMED AND JOB RESPONSIBILITIES
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STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RATE/SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE <input type="checkbox"/> YES <input type="checkbox"/> NO		\$	PER	

Give name, address and telephone number of three references who are not related to you and are not previous employers:

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Veteran of U.S. Military Service?  YES  NO. If yes, branch \_\_\_\_\_

SCHOOL	NUMBER OF YEARS COMPLETED	DEGREE DIPLOMA

Indicate languages you speak, read, and/or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Honors Received. State any additional information you feel may be helpful to us in considering your application.

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List professional, trade, business or civic activities and offices held. (You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or protected status):

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**SPECIAL SKILLS AND QUALIFICATIONS**

Summarize special skills and qualifications acquired from employment or other experience

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## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby authorize any and all schools, former employers, references, courts and any other who have information about me to provide such information to STARS or any of its representatives, agents or vendors and release all parties involved from any liability for any and all damage that may result from providing such information.

I understand that if offered a position with STARS, I may be required to submit to a pre-employment medical examination, drug screening, background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I understand that this application for employment shall be considered active for a period of time not to exceed 45 days. If I wish to be considered for employment beyond this time period I shall inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that effect is executed by the employer and employee in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

**BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE STATEMENT.**

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

\_\_\_\_\_  
Date

<b>FOR HUMAN RESOURCES DEPARTMENT USE ONLY</b>	
Arrange interview <input type="checkbox"/> YES <input type="checkbox"/> NO DATE OF INTERVIEW: _____	
COMMENTS: _____ _____	
EMPLOYED <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE EMPLOYED: _____
BY: _____	DATE: _____