



EMPLOYMENT APPLICATION/CAREER HISTORY FORM

Note: Complete application, save and email to: hr@menaregional.com

- In order to complete our hiring processes please fill out our Career History Form.
- Please provide information about every full time job you have held in your career, and EVERY part time job you have held in the past 6 years.
- A final step before a job offer is for the candidate to arrange personal reference calls with former bosses.

Mena Regional Health Systems is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, age, sex, veteran status, national origin or disability.

Position Applied For	Date of Application

Employment Type Applied For: Full-time POOL Part-time

Last Name	First Name	Middle Name

Address	City	State	Zip Code

Last 4 of S.S. Number	Home Telephone	Mobile Telephone

EMAIL:		
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How did you find out about this position? _____

Are you eligible to work in the United States? Yes No

Are you over the age of 18 years? Yes No

Have you ever worked for Mena Regional Health Systems before? Yes No

Have you ever been convicted of a felony? Yes No

If yes- What Date/Year: _____ Please Explain:

Is anyone related to you employed by MRHS? Yes No

If yes, please give name and relation to you _____

Have you ever been terminated or asked to resign from a job? Yes No

If yes, explain _____

What salary or rate of pay do you expect to receive if employed? _____ per _____

On what date would you be available to work? _____

Check all shifts you're available to work: Day Night Weekend

List your professional licenses. _____

Indicate all active Certifications and their expiration date:

BLS exp date _____ ACLS exp date _____ NRP exp date _____ PALS exp date _____

EDUCATION

	Name & Location of School (City & State)	# of Years Complete	Received Degree/ Diploma Yes/No	Degree type Earned (Associate, Bachelors, Masters)	Course Study/Major
High School					
College					
Graduate					
Vocational					

What are your computer skills if any:

Excel: Yes or NO: If yes: What are you able to do in Excel? _____
 Power Point: Yes or NO: If yes: Skill level? _____
 Microsoft Word: Yes or NO: If yes- Can you merge documents? _____
 What other programs do you have experience in? _____
 Typing Speed: _____

CAREER HISTORY

Begin with most recent employer. Do not exclude any employment during the past ten years. Include any applicable temporary employment

Company Name	Employment Dates from	to	Pay Rate or Salary \$
Your Position at Company			
How would your supervisor/manager rate you?	What is your best guess as to how your Manager would rate your overall performance? <input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Impossible to Say		
Achievements			
Core Duties			
Reason for leaving			
Company Address			
Company Phone			
Supervisor Name and Phone #			
How would you rate your Supervisor at this company	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Impossible to Say		
If you are leaving (or have already left) this position, was the reason for leaving:	__100% Mine __ Mutual __100% Employer's (terminated) __ Not leaving the company __ Other Circumstances		
If terminated please explain			

Please be aware that prior to a job offer, you may be required to arrange an interview with your previous boss/supervisor. May we contact this employer? __ Yes __ Not at this time __ Never

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		from	to	\$
Your Position at Company				
How would your supervisor/manager rate you?	__ Excellent __ Very Good __ Good __ Fair __ Poor __ Impossible to say			
Achievements				
Core Duties				
Reason for leaving				
Company Address				
Company Phone				
Supervisor Name and Phone #				
How would you rate your Supervisor at this company	How would you rate your Supervisor at this Company? __ Excellent __ Very Good __ Good __ Fair __ Poor __ Impossible to say			
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How would your supervisor/manager rate you?	__ Excellent __ Very Good __ Good __ Fair __ Poor __ Impossible to say			
Reason for leaving				
Achievements				
Core Duties				
Company Address				
Company Phone				
Supervisor's Name and Phone #				
How would you rate your Supervisor at this company	How would you rate your Supervisor at this Company? __ Excellent __ Very Good __ Good __ Fair __ Poor __ Impossible to say			
If you are leaving (or have already left) this position, was the reason for leaving:	__ 100% Mine __ Mutual __ 100% Employer's (terminated) __ Not leaving the company __ Other Circumstances			
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List 3 Professional Business References: (Former or current supervisors or co-workers, it must be someone who has worked with you and can provide a business professional reference.)

Name	Company	Phone #	Email

~Specializing In You~

“Specializing in You” is more than just an advertising slogan for Mena Regional Health System. It’s the core of who we are. We do specialize in our patient’s needs, but we also specialize in our employees. It’s about our people... our staff... who has made us the successful regional healthcare system we’ve become.

Mena Regional Health System is located in Mena on the West Central border of Arkansas. Mena is a rural community offering its residents terrific school systems, a community college, lower cost of living and a secure environment that is a great place to raise a family. Please visit <http://visitmena.com/> to learn of more recreational opportunities. Specifically, staff at Mena Regional enjoys the following benefits:

- ❖ Health/Dental/Vision Insurance | Retirement Plan | Life Insurance| Tuition Assistance | Scholarship opportunities through our support foundation | Prescription Benefits| Credit Union| Opportunities for Advancement.|

Mena Regional Health System is an Equal Opportunity Employer

In order to provide equal employment and advancement opportunities to all individuals, employment decisions at Mena Regional Health System will be based on merit, qualifications, and abilities. Mena Regional Health System does not in employment opportunities or practices on the basis of race, color, religion, gender, national origin, age, disability, sexual identity, or any other classification in accordance with federal state and local statues, regulations, and ordinances. This equality of treatment pertains to all persons in all aspects of the employer-employee relationship.

Pre-Employment Screening

Mena Regional Health System is committed to providing a safe, efficient and productive work environment for all employees. To help ensure that safe working environment, each applicant to whom an offer of employment has been made will be required as a condition of employment to undergo a substance test. Applicants will be asked to read the policy and acknowledge their consent to participate in the pre-employment screening upon completion of the job application. Each applicant consents and will undergo a background check.

Smoke Free Facility

Mena Regional Health System is committed to promoting health, wellness, prevention and the treatment of diseases within the community, as well as providing a safe, clean and healthy environment for our patients, visitors, and employees. The use of tobacco/nicotine products in any MRHS owned or leased vehicles and/or facilities, to include parking areas, lawns, gardens, docks, ramps, storage and/or office buildings is prohibited. In order to accomplish this improvement, we are committed to providing helpful information and programs to assist patient and current employees in reducing their dependence on tobacco/nicotine products.

Important Notice- Read Carefully Before Signing This Application:

In consider of my employment, I agree to conform to the rules and standards of Mena Regional Health System, as amended from time to time in MRHS’s sole discretion. I understand that if employed, the terms and conditions of my employment, including duties, hours, working area and days of work may be changed from time to time by MRHS as it deems necessary. I further agree that my employment can be terminated at will, with or without cause, and with or without notice at any time either at my option or at the option of Mena Regional Health System. I understand that no employee or representative of MRHS, other than the Administrator, has any authority to enter into any agreement for employment for any specified period of time, or to make any express or implied agreement contrary to the foregoing.

In addition I understand that offers of employment are conditioned upon the receipt of satisfactory response to reference request and the provision of satisfactory proof of an applicant’s identify and legal authority to work in the United States. Offers of employment are also conditional upon the successful completion of a medical examination provided by MRHS (as applicable), which includes a pre-employment drug test.

I hereby certify that the information contained in this application from is true and correct to the best of my knowledge, and agree to have any of the statements checked by MRHS unless I have indicated to the contrary. I authorize the references listed in this application to provide Mena Regional Health System any and all information concerning my previous employment and pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to MRHS or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer, or, if I am hired, in my dismissal from employment.

Signature of Applicant

Date