



HOSPICE OF IMPERIAL VALLEY

137 S 8th Street | El Centro, CA 92243 | 760-352-8905 | info@ivhospice.org

APPLICATION FOR EMPLOYMENT

Please complete all applicable sections. A resume may be attached, but does not replace this application.

California Applicant Notice: Do not disclose salary history or criminal history on this application. Pay scale information is available upon reasonable request. Reasonable accommodation is available during the application process upon request.

POSITION INFORMATION

Position Applied For		Application Date	
Department / Discipline		Date Available	
Employment Preference	☐ Full-Time ☐ Part-Time ☐ Per Diem/PRN ☐ Temporary	Shift Preference	☐ Days ☐ Evenings ☐ Nights
Referral Source		On-Call / Weekends	☐ Available ☐ Not Available ☐ N/A

APPLICANT INFORMATION

Legal Last Name		First Name	
Preferred Name (optional)		Middle Initial	
Address		Apt/Unit	
City / State / ZIP		Phone	
Email		Best Contact Method	☐ Phone ☐ Email ☐ Text
Previously applied/worked here?	☐ No ☐ Yes	If yes, when/position	

JOB-RELATED REQUIREMENTS & AVAILABILITY

Can you perform the essential functions of the position, with or without reasonable accommodation?	☐ Yes ☐ No
If the position requires travel to patient homes/community locations, can you meet that requirement?	☐ Yes ☐ No ☐ N/A
If driving is an essential job function, can you maintain a valid driver's license and required auto insurance?	☐ Yes ☐ No ☐ N/A
If hired, can you provide documentation establishing identity and authorization to work in the U.S. as required by law?	☐ Yes ☐ No
Are you available for the schedule requirements stated for the position?	☐ Yes ☐ No

General Availability (check all that apply): ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday



PROFESSIONAL LICENSES & CERTIFICATIONS

Credential / License	State / Issuer	License / Cert. No.	Expiration	Status

HEALTHCARE / HOSPICE EXPERIENCE

☐ Hospice	Years: _____	☐ Home Health	Years: _____
☐ Acute Care / Hospital	Years: _____	☐ Skilled Nursing / LTC	Years: _____
☐ Pediatrics	Years: _____	☐ Case Management	Years: _____
☐ Administrative / Office	Years: _____	☐ Other	_____

EDUCATION & TRAINING

Level	School / Institution	City / State	Degree / Certificate / Field	Completed
High School / GED				☐ Yes ☐ No
College / University				☐ Yes ☐ No
Vocational / Technical				☐ Yes ☐ No
Other				☐ Yes ☐ No

EMPLOYMENT HISTORY - MOST RECENT EMPLOYER

Employer Name		Phone	
Address		City/State/ZIP	
Job Title		Supervisor	
Dates Employed	From ____/____/____ To ____/____/____	May we contact?	☐ Yes ☐ No
Reason for Leaving			
Primary Duties / Responsibilities			



EMPLOYMENT HISTORY - EMPLOYER 2

Employer Name		Phone	
Address		City/State/ZIP	
Job Title		Supervisor	
Dates Employed	From ____/____ To ____/____	May we contact?	☐ Yes ☐ No
Reason for Leaving			
Primary Duties / Responsibilities			

EMPLOYMENT HISTORY - EMPLOYER 3

Employer Name		Phone	
Address		City/State/ZIP	
Job Title		Supervisor	
Dates Employed	From ____/____ To ____/____	May we contact?	☐ Yes ☐ No
Reason for Leaving			
Primary Duties / Responsibilities			

PROFESSIONAL REFERENCES

Name	Professional Relationship	Organization	Phone	Email

ADDITIONAL INFORMATION

Please provide any additional job-related information you would like us to consider:



APPLICANT STATEMENT & CERTIFICATION

I certify that the information provided in this application and in any accompanying materials is true, complete, and accurate to the best of my knowledge. I understand that material misrepresentation or omission may result in withdrawal of consideration or, if employed, corrective action up to and including termination.

I authorize Hospice of Imperial Valley to verify job-related information provided in this application, including employment history, education, professional licenses/certifications, and references, subject to applicable law. Any consumer report or background check will be handled through separate disclosures and authorizations and at the legally appropriate stage of the hiring process.

I understand that any offer of employment may be contingent upon lawful, job-related pre-employment requirements applicable to the position, including verification of identity and work authorization, credentials, references, and post-offer health or safety requirements.

I understand that this application is not a contract of employment. If hired, employment is at will to the fullest extent permitted by California law, unless otherwise provided by a written agreement signed by an authorized representative of Hospice of Imperial Valley.

Applicant Signature		Date	
Printed Name		Position Applied For	

CALIFORNIA APPLICANT INFORMATION

Fair Chance: Applicants should not disclose criminal history on this application. If conviction history is lawfully considered, it will be addressed at the appropriate stage of the hiring process and in accordance with applicable California law.

Salary History / Pay Scale: Hospice of Imperial Valley does not request salary or compensation history. Applicants may request the pay scale for the position.

Equal Employment Opportunity / Accommodation: Employment decisions are based on legitimate job-related qualifications and business needs. Reasonable accommodation is available during the application and interview process upon request.

FOR HUMAN RESOURCES USE ONLY

Application Received		Interview Date(s)	
Interviewer(s)		Department / Discipline	
Candidate Status	☐ Proceed ☐ Hold ☐ Not Selected	Conditional Offer Date	
Employment Status	☐ FT ☐ PT ☐ PRN ☐ Temp	Start Date	
Approved Pay Rate / Range		Supervisor	
Offer Accepted?	☐ Yes ☐ No	Orientation Date	
Notes			

Post-Offer / Pre-Employment Checklist (as applicable):

- ☐ Form I-9 / work authorization verification
- ☐ Professional license / certification verification
- ☐ References verified
- ☐ Background check / Live Scan completed at lawful stage, if applicable
- ☐ Driver's license / auto insurance / DMV verification, if job requires driving
- ☐ TB screening / occupational health clearance, if applicable
- ☐ CPR/BLS or other required certifications verified
- ☐ OIG / exclusion screening and other required healthcare compliance checks