

An Equal Opportunity Employer Location (For Office Use Only)

Each question must be fully and accurately answered. No action will be taken on this Application until all questions have been answered. PLEASE PRINT or complete on-line. Both electronic and hard copy signatures will be accepted for submission.

PERSONAL (Please Print)

Last Name: _____ First Name: _____ Middle Initial: _____
Date Available for Employment: _____
Street Address: _____ Unit Number (if applicable): _____
City / State / Zip Code: _____
Mobile Phone: () - _____ Home Phone: () - _____ Work Phone: () - _____
Email Address: _____
Position applied for: _____ Referred by: _____

What is your desired work schedule?

Full-Time Part-Time PRN Day Evening Night Weekend Rotation

Have you previously worked for any employer for which Nueterra has provided services? Yes No

If "Yes", please list company name and dates of employment:

Are you over 18 years of age? Yes No

Are you legally authorized to work in the United States? Yes No

Federal Law requires proof of identity and employment authorization for all new employees.

For Driving Job Only: Do you have a valid driver's license? Yes No

Driver's License Number: _____ State Issued: _____

EMPLOYMENT (Please Print)

If possible, please list the last ten (10) years of your previous work experience in the spaces provided below, starting with your most recent employer. (Nueterra may contact former employers to validate the information provided on this Application)

Name of Current or Most Recent Employer: _____

Address: _____

Phone: () - _____

Dates Employed: From: _____ To: _____ Type of Business: _____

Supervisor's Name and Title: _____

Rate of Pay: Beginning: _____ Ending: _____ Hourly Annual Salary

Job Title and Duties: _____

Reason for Leaving:

May we contact your current employer? Yes No

Name of Current or Most Recent Employer: _____
Address: _____
Phone: (____) - _____
Dates Employed: From: _____ To: _____ Type of Business: _____
Supervisor's Name and Title: _____
Rate of Pay: Beginning: _____ Ending: _____ Hourly Annual Salary
Job Title and Duties: _____

Reason for Leaving: _____

Name of Current or Most Recent Employer: _____
Address: _____
Phone: (____) - _____
Dates Employed: From: _____ To: _____ Type of Business: _____
Supervisor's Name and Title: _____
Rate of Pay: Beginning: _____ Ending: _____ Hourly Annual Salary
Job Title and Duties: _____

Reason for Leaving: _____

Please list any reasons for gaps in your employment history:

RECORD OF CONVICTION

Have you ever been convicted of a felony? Yes No (A conviction will not necessarily disqualify an applicant)

Have you ever pled guilty or no contest to a felony charge? Yes No

If "Yes", please explain:

Have you ever been sanctioned by Medicare, Medicaid, Champus or other government programs?
 Yes No

Have you held a management position in an organization that was sanctioned by Medicare, Medicaid, Champus or other government programs?
 Yes No

EDUCATION

	Name	Highest Grade/Degree Achieved	Major Subject
High School	_____	_____	_____
College	_____	_____	_____
Other	_____	_____	_____

(Business, Vocational, Military) _____

Please list any other skills you feel may relate to the position for which you are applying:

PROFESSIONAL LICENSES, CERTIFICATIONS OR MEMBERSHIPS

Type of license(s)/certification(s) held:

Have you ever had any sanctions against any of these license(s)? Yes No

If "Yes", please explain:

License(s) expiration date(s): _____

Other professional memberships:

(You need not disclose membership in professional organizations that may reveal information regarding race, color, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other legally protected status. Neither Nueterra nor any employers affiliated with Nueterra base employment decisions on factors that are not job-related.)

PROFESSIONAL REFERENCES

Please list three (3) references (not relatives):

Name	Address	Phone	Relationship
_____	_____	() - _____	_____

_____	_____	() - _____	_____
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_____	_____	() - _____	_____
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AGREEMENT TO INVESTIGATION AND AT WILL AGREEMENT

I understand and agree that my background could be investigated to the extent deemed necessary to confirm the accuracy and completeness of my answers to this Application and to determine my qualification for employment and that the nature and scope of the investigation, if one is conducted, could include general identification information and information concerning my present or past employment, education, general reputation, character, personal characteristics, and habits, and other such relevant job-related information, including information that may be developed through personal interviews with third parties. I further understand and agree that only job-related information developed from such an investigation will be considered in evaluating my qualification for employment or continued employment. I authorize and consent to the foregoing background investigation without any further notice.

I certify that the answers given by me to the foregoing questions and statements are true and correct without any material omissions of any kind whatsoever. I agree that my Application for employment may be rejected, my candidacy for employment disqualified, or my subsequent employment terminated because of false or misleading answers or statements or because of any material omissions of fact made by me in this Application or at any time during the selection process.

I also authorize the employers, educational institutions, persons, or other third parties named above, including any other person or parties who may possess relevant background information, to disclose any information regarding my background, employment, education, character, and qualifications without any further notice from or release by me. I hereby release the foregoing persons and parties from any and all claims, losses, or liability of any type or nature for disclosing any such information to Nueterra or any person or party acting on behalf of Nueterra.

I also understand and agree that if employed my employment will be strictly at will, and either I or my employer, including Nueterra, may terminate the employment relationship at any time, without notice, and for any reason. I further understand and agree that this Application does not constitute an offer of employment or an employment contract. I acknowledge that, if subsequently employed, the at-will nature of my employment cannot be altered or modified except by a written agreement signed by the Chief Executive Officer of Nueterra entitled "Modification of at Will Employment." I acknowledge that an offer of employment will be conditioned upon satisfactory proof of my authorization to work in the United States and that my failure to supply such proof in a timely manner will result in termination of my employment without regard for citizenship, national origin, or ancestry.

In exchange for Nueterra's receipt of this Application, I promise to submit exclusively to and resolve through binding arbitration under the Federal Arbitration Act any and all claims, controversies, or disputes involving Nueterra or any person or party affiliated with Nueterra, whether such claims are based on federal or state statute, regulation, common law, equity, municipal ordinance, or any other legal or equitable ground ("claims"). The parties also shall arbitrate all disputes concerning the arbitrability of any claims and the validity, enforceability, scope, interpretation, and application of this Agreement. The parties waive trial by judge or jury and agree to arbitrate their claims individually and not as a member or representative of a class or collective action unless all parties consent to class or collective arbitration, but the parties do not waive any other rights or remedies available under law. Arbitration shall be conducted before a single arbitrator pursuant to the National Rules for the Resolution of Employment Disputes of the American Arbitration Association in effect on the date of notice of a claim. A party that successfully obtains an order compelling arbitration shall be awarded its attorney fees and costs.

X

Applicant Signature

Date

AFFIRMATIVE ACTION :: VOLUNTARY SELF IDENTIFICATION

[Facility] is an Equal Opportunity Employer. As required by law, we must record certain information for government reporting purposes as part of our Affirmative Action Program.

Applicants for employment are also invited to participate in the Affirmative Action Program by reporting their status as disabled, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

SECTION 1 :: GENERAL APPLICANT INFORMATION

Name: _____ Date: _____
Position Applied For: _____

SECTION 2 :: PLEASE CHECK (4) ALL THAT APPLY (SEE BELOW FOR DEFINITIONS)

Race or Ethnic Identity

- Hispanic or Latino
- White (not Hispanic or Latino)
- Black/African American (not Hispanic or Latino)
- Native Hawaiian or Pacific Islander (not Hispanic or Latino)
- Asian (not Hispanic or Latino)
- American Indian or Alaskan Native (not Hispanic or Latino)
- Two or More Races (not Hispanic or Latino)

**Veteran Status

- Vietnam Era Veteran
- Special Disabled Veteran
- Other Protected Veteran
- Recently Separated Veteran
- Armed Forces Service Medal Veteran

Gender

- Male
- Female

Other

- Individual with Disabilities

I do not wish to self-identify

X

Signature

How did you hear of our opening?

- Current Employee Newspaper Ad Recruiter Other

If "Other", please explain below:

For Human Resources Use Only:

Requisition #: _____

Job Group: _____

[**Editors note: According to 41 CFR 60-741.42, there are only two circumstances when an employer may ask a disabled applicant to self-identify on a pre-offer basis:

(1) The invitation is made when the contractor actually is undertaking affirmative action for individuals with disabilities at the pre-offer stage; or (2) The invitation is made pursuant to a Federal, state or local law requiring affirmative action for individuals with disabilities.

According to 41 CFR 60-250.42, there are only two circumstances under which an employer may ask applicants who are Special Disabled Veterans to self-identify on a pre-offer basis:

1) The invitation is made when the contractor actually is undertaking affirmative action for special disabled veterans at the pre-offer stage; or (2) The invitation is made pursuant to a Federal, state or local law requiring affirmative action for special disabled veterans.]

EEOC RACE/ETHNIC IDENTIFICATION CATEGORIES

Hispanic or Latino

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino)

A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino)

A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)

A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino)

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino)

A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino)

All persons who identify with more than one of the above five races.

Individual with Disabilities

Defined as a person who (1) has a physical or mental impairment which substantially limits one or more of his or her major life activity(s), (2) has a record of such impairment(s), or (3) is regarded as having such impairment(s). For purposes of this definition, an individual with disability(s) is substantially limited if he or she is likely to experience difficulty in securing, retaining, or advancing in employment because of the disability(s).

Veteran of the Vietnam-Era

Means a person who: (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released there from with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all other cases; or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in any other location.

Special Disabled Veteran

Means (i) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans' Affairs for a disability (A) rated at 30 percent or more, or (B) rated at 10 or 20 percent in the case of a veteran who has been determined under Section 38 U.S.C. 3106 to have a serious employment handicap or (ii) a person who was discharged or released from active duty because of a service connected disability.

Other Protected Veteran

Includes any veteran who served on active duty in the U.S. military, ground, navel or air service in a war, campaign or expedition in which a campaign badge has been authorized under laws administered by the Department of Defense.

Recently Separated Veteran

Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one year period beginning on the date of such veteran's discharge or release from active duty.

Armed Forces Service Medal Veteran

Includes any veteran who, while serving on active duty in the Armed Forces, participated in a United States military operation for which a service medal was awarded pursuant to Executive Order 12985.