

# Edward C. Allworth Veterans' Home

## Application Process

- Step 1: Complete the WorkSource Oregon registration process by visiting [www.WorkSourceOregon.org](http://www.WorkSourceOregon.org) and clicking on 'Register or Log in for WorkSource Oregon Services' at the top of the page. Follow the instructions to create or update your account.
- Step 2: Complete the Edward C. Allworth Veterans' Home job application and return to:

Edward C Allworth Veterans Home  
600 North 5<sup>th</sup> Street, Lebanon, OR 97355

Applicants selected for an interview will be notified by phone.



**WORKSOURCE OREGON**





EDWARD C. ALLWORTH  
**OREGON VETERANS' HOME**  
 LEBANON ★ THE PLACE WHERE HONOR LIVES

**A RESUME WILL NOT SUBSTITUTE FOR COMPLETION OF THE WORK HISTORY SECTION.**

**Work History**

<b>Job Number 1 (Current or most recent position)</b>		
Name of Employer:	Kind of Business:	
Supervisor's Name:	Supervisor's Phone Number:	
Address: Street/City/State/Zip		
Job Title:	Rate of Pay:	Employed from (MM/YYYY) to (MM/YYYY)
Duties (List all duties you performed. No credit will be given if this section is not completed.):		
_____		
_____		
_____		
_____		
_____		
Reason for leaving this position:		
Your name while employed there (for reference)		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Job Number 2</b>		
Name of Employer:	Kind of Business:	
Supervisor's Name:	Supervisor's Phone Number:	
Address: Street/City/State/Zip		
Job Title:	Rate of Pay:	Employed from (MM/YYYY) to (MM/YYYY)
Duties (List all duties you performed. No credit will be given if this section is not completed.):		
_____		
_____		
_____		
_____		
Reason for leaving this position:		
Your name while employed there (for reference)		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No



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<b>Job Number 3</b>		
Name of Employer:	Kind of Business:	
Supervisor's Name:	Supervisor's Phone Number:	
Address: Street/City/State/Zip		
Job Title:	Rate of Pay:	Employed from (MM/YYYY) to (MM/YYYY)
Duties (List all duties you performed. No credit will be given if this section is not completed.): _____ _____ _____ _____ _____ _____ _____		
Reason for leaving this position:		
Your name while employed there (for reference)		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Job Number 4</b>		
Name of Employer:	Kind of Business:	
Supervisor's Name:	Supervisor's Phone Number:	
Address: Street/City/State/Zip		
Job Title:	Rate of Pay:	Employed from (MM/YYYY) to (MM/YYYY)
Duties (List all duties you performed. No credit will be given if this section is not completed.): _____ _____ _____ _____ _____ _____ _____		
Reason for leaving this position:		
Your name while employed there (for reference)		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No



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Have you previously been employed by Veterans Care Centers of Oregon?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, when?	Under what name?		

Have you ever been found to have committed abuse?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a felony?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been excluded or prohibited from being paid with federal monies?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

\*Conviction will not necessarily disqualify an applicant for employment.

**REFERENCES**

List individuals who may be able to give us additional information regarding your skills (i.e., teachers,). You may also wish to list work associates other than immediate supervisors.

Name and Occupation	Address and Phone Number
1.	
2.	
3.	
4.	

**Certification and Signature**

I understand that any verbal or written statement that is false, fraudulent or misleading contained in this application or attached materials or made in the course of any related employment process, whether made by me or by others at my request, will result in rejection of my application, denial of employment or dismissal from employment if discovered after employment; and under some circumstances may result in prosecution for a crime.

- I certify that all statements contained herein are true and complete whether made by me or others at my request.
- I understand that if hired, I must prove that I am legally authorized to work in the United States.
- I authorize the Veterans' Care Centers of Oregon to check employment references and verify my education information provided on this employment application and as disclosed in the interview process. I also release the individuals, companies, or institutions from whom Veterans' Care Centers of Oregon may request information concerning me from all liability for any damage incurred in furnishing reference information.
- I authorize the Veterans' Care Centers of Oregon to check my driving record if the position for which I am applying requires driving or if the position I am applying for involves the administration of medication.
- I understand that if selected, that any job offer I receive is contingent upon the successful completion of the drug screening and background check.

I release the Veterans' Care Centers of Oregon and all providers of information from any liability as a result of furnishing and receiving any information related to the Veterans' Care Centers of Oregon's hiring process.

<b>Signature (Must be signed in INK):</b>	<b>Date:</b>
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**DEPARTMENT OF HUMAN SERVICES**  
**Aging & People with Disabilities and Developmental Disabilities**  
**ORS 443.004/OAR 407-007-0275 Crimes**

Public funds may not be used to support, in whole or in part, the employment in any capacity of an individual having contact with a recipient of home health or in-home care agency services or support services, or contact with a resident of a residential facility or an adult foster home, who has any of the following convictions. **ORS 443.004/OAR 407-007-0275 impacts anyone with this type of employment hired on or after 7/28/2009, or changing positions on or after 7/28/2009.**

If the individual has been convicted of any of the crimes listed below (or **attempt, conspiracy, or solicitation** for any of the crimes), THE INDIVIDUAL IS NOT ELIGIBLE FOR THE POSITION and there are no hearing rights with BCU.

- **FIVE YEAR CRIMES:** Regarding care for Vulnerable individuals 65 years or older. If the individual is exclusively caring for individuals who are 65 years or older, the crimes in the list below in underlined italics make the individual ineligible for five years from the date of conviction [If the client is under 65, the crime is PERMANENT.]. Thereafter, the conviction would be considered a permanent review crime subject to a weighing test.
- **TEN YEAR CRIMES:** Certain Drug Crimes. If the individual has a conviction for delivery (selling) of drugs or manufacture (making) of drugs (or attempt, conspiracy, or solicitation for these types of crimes) in the past 10 years.
- **PERMANENT CRIMES:** The following crimes involve violence, harm to vulnerable individuals, serious theft, and sex crimes. A conviction of one of these crimes would make an individual permanently ineligible (unless as noted above in Five Year Crimes).

ORS 163.095, Aggravated murder  
ORS 163.115, Murder  
ORS 163.118, Manslaughter I  
ORS 163.125, Manslaughter II  
ORS 163.145, Criminally negligent homicide  
ORS 163.149, Aggravated vehicular homicide  
ORS 163.165, Assault III  
ORS 163.175, Assault II  
ORS 163.185, Assault I  
ORS 163.187, Strangulation  
ORS 163.200, Criminal mistreatment II  
ORS 163.205, Criminal mistreatment I  
ORS 163.225, Kidnapping II  
ORS 163.235, Kidnapping I  
ORS 163.263, Subjecting another person to involuntary servitude II  
ORS 163.264, Subjecting another person to involuntary servitude I  
ORS 163.266, Trafficking in persons  
ORS 163.275, Coercion  
ORS 163.355, Rape III  
ORS 163.365, Rape II  
ORS 163.375, Rape I  
ORS 163.385, Sodomy III  
ORS 163.395, Sodomy II  
ORS 163.405, Sodomy I  
ORS 163.408, Unlawful sexual penetration II  
ORS 163.411, Unlawful sexual penetration I  
ORS 163.415, Sexual abuse III  
ORS 163.425, Sexual abuse II  
ORS 163.427, Sexual abuse I  
ORS 163.432, Online sexual corruption of a child II, if the offender reasonably believed the child to be more than five years younger than the offender  
ORS 163.433, Online sexual corruption of a child I, if the offender reasonably believed the child to be more than five years younger than the offender  
ORS 163.435, Contributing to the sexual delinquency of a minor  
ORS 163.445, Sexual misconduct, if the offender is at least 18 years of age

ORS 163.465, Public indecency  
ORS 163.467, Private indecency  
ORS 163.525, Incest with a child victim  
ORS 163.535, Abandonment of a child  
ORS 163.537, Buying or selling a person under 18 years of age  
ORS 163.547, Child neglect I  
ORS 163.670, Using a child in display of sexually explicit conduct  
ORS 163.680, Paying for viewing a child's sexually explicit conduct  
ORS 163.684, Encouraging child sexual abuse I  
ORS 163.686, Encouraging child sexual abuse II  
ORS 163.687, Encouraging child sexual abuse III  
ORS 163.688, Possession of materials depicting sexually explicit conduct of a child I  
ORS 163.689, Possession of materials depicting sexually explicit conduct of a child II  
ORS 163.700, Invasion of personal privacy  
ORS 164.055, Theft I  
ORS 164.057, Aggravated theft I  
ORS 164.098, Organized retail theft  
ORS 164.125, Theft of services, if charged as a felony  
ORS 164.215, Burglary II  
ORS 164.225, Burglary I  
ORS 164.325, Arson I  
ORS 164.377, Computer crime, if charged with a felony  
ORS 164.405, Robbery II  
ORS 164.415, Robbery I  
ORS 165.013, Forgery I  
ORS 165.022, Criminal possession of a forged instrument I  
ORS 165.032, Criminal possession of a forgery device  
ORS 165.800, Identity theft  
ORS 165.803, Aggravated identity theft  
ORS 167.012, Promoting prostitution  
ORS 167.017, Compelling prostitution  
ORS 167.057, Luring a minor  
ORS 167.320, Animal abuse I  
ORS 167.322, Aggravated animal abuse I  
ORS 181.594, Sex crimes, including transporting child pornography into the state