



I certify that all information that I supply to Door County Medical Center and any Door County Medical Center facility, including the information I submit in my Internet employment application and my post-offer employment health questionnaire and assessment, will be truthful and complete, and I authorize investigation of any statements I make.

I release from any and all liability all representatives of Door County Medical Center and any Door County Medical Center facility for their acts performed in good faith and without malice in connection with evaluating my application, credentials, and qualifications. I further authorize any party having information bearing upon my qualifications for employment to release such information to any Door County Medical Center facility (unless otherwise stated). I also release from any and all liability all individuals and organizations who provide information to any Door County Medical Center facility in good faith and without malice concerning my employment competencies, ethics, character, and other qualifications, including other privileged or confidential information, and if I am employed, I also authorize Door County Medical Center to release such similar information to prospective future employers, and I release Door County Medical Center and its employees from any liability or damages that may result from providing such information.

I understand that any false statements or omissions concerning requested information shall be a sufficient basis for denial of employment or summary dismissal. I also understand that my employment at any Door County Medical Center facility may be contingent upon the satisfactory completion of any or all of the following: health examination, drug screen, caregiver background check, OIG clearance, Medicare/Medicaid eligibility verification, and/or investigation of my work record and references. I consent to a post-offer pre-employment health examination and such future examination as may be required by any Door County Medical Center facility. I further understand that, if employed, I will serve a training/orientation period appropriate to the position.

I understand that if I am employed by any Door County Medical Center facility, my employment can be terminated by Door County Medical Center, the employing Door County Medical Center facility or by me at will, with or without cause, and with or without notice, at any time, except as may be required by law. I understand that no one at any Door County Medical Center facility or Door County Medical Center, other than the President of the employing entity, has the authority to alter, orally or in writing, this terminable-at-will status of employment.