

EMPLOYEE APPLICATION

DATE _____

POSITION APPLIED FOR _____

LAST NAME	FIRST NAME	MIDDLE NAME
ADDRESS	CITY	STATE
		ZIP CODE
HOME PHONE	CELL PHONE	
SOCIAL SECURITY #	CO DRIVER'S LICENSE #	
DATE OF BIRTH	MALE / FEMALE	

QUESTIONS:

YES

NO

Are you at least 18 years old?

Do you have a car?

Can you use public transportation?

Do you have a drivers license?

Do you have any allergies?

If yes, then describe: _____

Have you been recently arrested?

Have you been convicted of a felony?

Have you ever been charged with abuse, neglect, and/or drug consumption?

Are there hours or days when you are not available? _____

What areas can you serve? _____

EDUCATIONAL BACKGROUND

EDUCATION	HIGH SCHOOL	COLLEGE	OTHER
NAME			
ADDRESS CITY, STATE			
GRADUATED?			
DEGREE OR MAJOR			

PREVIOUS EMPLOYMENT

DATES	SUPERVISOR	PHONE #	POSITION	SALARY	REASON FOR LEAVING

REFERENCE (NOT FAMILY OR FRIENDS)

NAME	OCCUPATION	PHONE#	YEARS KNOWN

I, Certify that answers given are true and complete to the best of my knowledge. I understand that false information in my application or interview may lead to termination. I authorize investigation of all references and statements as may be necessary to reach an employment decision. I understand that employment is conditional upon successful completion of a health assessment.

Criminal background check (CBI) is required. Drug or alcohol screening might be required randomly

Signature of Applicant **Date**

**REFERENCE CHECK QUESTIONNAIRE
STAFF ONLY**

Employee Name: _____

PERSONAL REFERENCE:

Date: _____ Time: _____ Contact Name: _____

Phone #: _____ Years/Months Known: _____ Relationship: _____

1. How will you describe the person's character?

2. Will you recommend this person for employment?

FORMER EMPLOYER:

Date: _____ Time: _____ Contact Name: _____

Phone #: _____ Years/Months Known: _____ Relationship: _____

1. What were the dates of employment?

2. What was the position held?

3. Is she/he eligible for re-hire?

4. How will you describe this person character?