

THE HOMEMAKERS HEALTH SERVICES

APPLICATION FOR EMPLOYMENT

The Homemakers Health Services considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. We are an equal opportunity employer.

(PLEASE PRINT)

Form section containing 'Position(s) Applied For', 'Date of Application', and 'How Did You Learn About Us?' with checkboxes for Advertisement, Friend, Walk-In, Employment Agency, Relative, and Other.

Form section for personal information including 'Last Name', 'First Name', 'Middle Name', 'Address', 'City', 'State', 'ZIP', 'Telephone Number(s)', and 'Email Address'.

If you are under 18 years of age, can you provide required proof of your eligibility to work? [ ] Yes [ ] No

Have you ever filed an application with us before? [ ] Yes [ ] No

If Yes, give date \_\_\_\_\_

Have you ever been employed with us before? [ ] Yes [ ] No

If Yes, give date \_\_\_\_\_

Are you currently employed? [ ] Yes [ ] No

May we contact your current employer? [ ] Yes [ ] No

Are you prevented from lawfully becoming employed in the country because of Visa or Immigration Status? [ ] Yes [ ] No

Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work? \_\_\_\_\_

Are you available to work: [ ] Full Time [ ] Part Time [ ] Shift Work [ ] Temporary

Are you currently on "lay-off" status and subject to recall? [ ] Yes [ ] No

Can you travel if a job requires it? [ ] Yes [ ] No

Have you ever been convicted of any misdemeanors or felonies which have not been annulled? [ ] Yes [ ] No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain \_\_\_\_\_

# EDUCATION

Please complete ALL that apply					
TYPE OF SCHOOL	NAME AND ADDRESS	CIRCLE LAST YEAR ATTENDED	MAJOR SUBJECT	GRADUATED	DEGREE
Elementary		5 6 7 8		[ ] YES [ ] NO	
High School		1 2 3 4		[ ] YES [ ] NO	
College		1 2 3 4		[ ] YES [ ] NO	
Graduate School		1 2 3 4		[ ] YES [ ] NO	
Business, Trade, Other		1 2 3 4		[ ] YES [ ] NO	

Indicate any foreign languages you can speak, read and/or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills and extra-curricular activities

State any additional information you feel may be helpful to us in considering your application

**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.       YES       NO

# EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

<b>1</b>	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			From	To	
Job Title		Supervisor			
Reason For Leaving					

<b>2</b>	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			From	To	
Job Title		Supervisor			
Reason For Leaving					

<b>3</b>	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			From	To	
Job Title		Supervisor			
Reason For Leaving					

<b>4</b>	Employer		Date Employed		Dates Employed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			From	To	
Job Title		Supervisor			
Reason For Leaving					

# APPLICANT'S STATEMENT

