



## APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age sex, religion, disability, medical condition, national origin, or marital status.

Name		Date
Street Address		
City	State	ZIP
Phone	SSN	
Cell Phone Number:	Email Address:	

<b>Emergency Contact</b>	
Name	Phone
Address	Relationship

I am applying for a position as a
Have you ever been convicted of a felony? yes    no
If yes, please provide details

<b>Transportation:</b> Many caregiver positions require the caregiver to transport a client.		
Do you have dependable transportation? yes    no	Make and model car	
License plate #	Driver license #	Auto insurance policy #
Insurance company	Insurance agent name	Insurance agent phone

<b>Availability</b>			
Number of hours you would like to work	Times you are available to work	Any times not available to work	Can you be called at the last minute in case of emergency? yes    no
Comments			



## Education

High school	City/State	Dates
College	City/State	Dates
Other	City/State	Dates
Degrees/certificates		
Special skills or courses		

## Experience

Discuss any training or experience working with the elderly
What would you like most about working with the elderly?
What would you like least about working with the elderly?

## Skills

Please indicate whether you have assisted with or performed the following tasks for seniors.

Companionship	yes	no	Vacuuming	yes	no	Laundry	yes	no
Bathing/ dressing	yes	no	Dusting	yes	no	Grocery shopping	yes	no
Grooming	yes	no	Clean bathrooms	yes	no	Cooking	yes	no
Incontinence	yes	no	Clean kitchen	yes	no	Driving	yes	no
Transfer assist	yes	no	Bed linen changes	yes	no	Medication reminders	yes	no



## Employment History

Please go back at least five years and tell us about your work history. Use reverse side of sheet if additional space is required.

May we contact your current employer?

yes   no

Company	From	To
Job title	Reason left	
Duties		
Supervisor	Phone	
Company	From	To
Job title	Reason left	
Duties		
Supervisor	Phone	
Company	From	To
Job title	Reason left	
Duties		
Supervisor	Phone	
Company	From	To
Job title	Reason left	
Duties		
Supervisor	Phone	



**Business References** (minimum 3)

Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #

**Personal References** (minimum 3, at least 2 must be non-family)

Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #
Name	Address	Relationship/Years Known	Local Phone #

**CERTIFICATION AND RELEASE:** I certify that I have read and understand the application note on page one of this form and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentation of facts called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents, including consumer reporting bureaus, to verify any information including, but not limited to, criminal history and motor vehicle driving records. I authorize all persons, schools, companies, and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. **I am willing to submit to drug testing to detect the use of illegal drugs prior to and at any time during employment. I understand that I will be required to pay a \$45 deposit to cover the cost of doing background checks. That amount will be returned if the background checks do not reveal criminal history that prevents you from being hired.**

Signature	Date
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**For Office Use Only** – Interviewer Comments

Return the application via email to **Care@MonarchSeniorCare.com** or via fax at **(815) 308-3415** or by postal mail to **Monarch Senior Care, 123 S. Eastwood Dr, #153, Woodstock, IL 60098**

