

PROFESSIONAL LICENSES AND CERTIFICATION

Please list any current professional licenses or certification

- Certified Nursing Assistant (CNA) License Number (if applicable): State(s):
- Licensed Practical Nurse (LPN) License Number (if applicable): State(s):
- Registered Nurse (RN) License Number (if applicable): State(s):
- Other: License Number (if applicable): State(s):

Have you ever been suspended or terminated due to abuse, neglect, or exploitation of a resident or patient? YES NO

Have you worked as a caregiver for children, elderly or disabled for at least one (1) year (paid or unpaid) YES NO

Have you worked as a home health aide, nurse aide, homemaker, or maid with an in-home services agency within the past six (6) months YES NO

Is there any reason that you would be ineligible to work as a in-home services worker? YES NO

PREVIOUS EMPLOYMENT

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO

MILITARY SERVICE

Branch _____ From _____ To _____

Rank at Discharge _____ Type of Discharge _____

If other than honorable, explain

CONSENT TO BACKGROUND SCREENINGS

List All aliases you have ever used (including maiden names and all married names):

CIRCLE ONE:

Will you consent to a pre-employment criminal record check? Yes or No

Will you consent to a closed records check? Yes or No

(Circling yes will not necessarily exclude you from employment)

DISCLAIMERS AND SIGNATURE

Abradel In-Home Care Solutions will not hire individuals listed on the Employee Disqualification List (EDL) in any capacity. Abradel In-Home Care Solutions will only hire individuals with no criminal history on the Family Care Registry (FCSR) background check. No individual with a Class A or B Felony or Abuse/Neglect finding listed on the FCSR results will be hired. The EDL will be monitored on a quarterly basis. The FCSR will be checked twice a year. If any new findings appear on either background check, employment will be suspended without pay and for terminated.

I certify that my answers are true and complete to the best of my knowledge. I also understand that I am required to provide proof of my identity and legal authorization to work in the United States, and that my authorization will be verified using **E-Verify** with the United States Department of Homeland Security.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date

Prospective employees will receive consideration without discrimination because of race, creed, color, religion, sex, national origin, disability, veteran status or any other protected class according to federal state and local laws.