

Share-A-Home, Inc.

APPLICATION FOR EMPLOYMENT

Name: _____ Date: _____
Last First Middle

Home Phone #: _____ Work Phone #: _____

Present Address: _____

Are you legally eligible for employment in the USA? Yes No

Are you age 18 or older? Yes No

Are you able to accept a position that requires:

a. Driver's license? Yes No b. Use of your automobile? Yes No

Position(s) applied for: _____

Would you work Full time Part time Specify days and hours if part time. _____

Were you previously employed by us? Yes No If yes, when. _____

If your application is considered favorably, on what date will you be available for work? _____

Can you perform the duties of the job you are applying for? Yes No

WORK EXPERIENCE

I. Employer: _____ Position: _____

City/ State: _____ Phone: _____

Employed from: _____ to _____ Supervisor: _____

Description of Duties: _____

Reason for Leaving: _____

II. Employer: _____ Position: _____
 City/ State: _____ Phone: _____
 Employed from: _____ to _____ Supervisor: _____
 Description of Duties: _____

 Reason for Leaving: _____

III. Employer: _____ Position: _____
 City/ State: _____ Phone: _____
 Employed from: _____ to _____ Supervisor: _____
 Description of Duties: _____

 Reason for Leaving: _____

RECORD OF EDUCATION

School	Name/Address	Last Year Completed	Did you graduate?	Course of Study
High School		1 2 3 4		
College		1 2 3 4		
Other (specify)		1 2 3 4		

PERSONAL REFERENCES

Please list three employment/ professional references and one personal character reference.

	Name	Occupation	Address	Telephone #
Professional				
Professional				
Professional				
Personal				

Other relevant experience, skills or qualifications: _____

May we contact the employers listed above? _____ If not, indicate which one(s) you do not wish us to contact: _____

Please note: At any time during your employment, a physical, mental, health, chemical dependency, or criminal history evaluation may be required if there is reasonable cause to believe the qualification requirements have not been met or that the employee cannot provide required care for the consumer(s).

I hereby affirm that all statements are accurate, complete and true to the best of my knowledge. I understand that if I knowingly give false information, I will not be eligible for employment with this agency.

In addition, I acknowledge that if hired, the employee relationship will be at will. "At will" employment means that the employer or employee may terminate the relationship at any time, with or without notice and for any reason or no reason. The at-will nature of employment can be changed only by a written agreement between the prospective employee and the authorized senior managerial employee.

As well, determination of position classification and compensation is made only by those individuals authorized and designated in current policy for prospective, current and former employees.

*All applicants will be considered for specified job for a period of 45 days.

Signature of Applicant

Date