

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Home Phone: () _____ Cell Phone: () _____

Date Available: _____ Position Applied for: _____

Are you legally eligible for employment in this country? YES NO Have you ever worked for Homecare Services? YES NO

If yes, date(s) _____ to _____

Note: A conviction will not automatically disqualify an applicant. The employer will consider type and seriousness of the crime, the frequency of violations, the applicant's age at the time of conviction, and the date of conviction or time elapsed since the conviction or completion of any jail sentence in addition to other job related criteria.

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Previous Employment

Company: _____ Phone: () _____

Address: _____ Pay: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: () _____

Address: _____ Pay: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: () _____

Address: _____ Pay: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

References

Please list three professional references including Name, Address, and Telephone Number.

1. _____
2. _____
3. _____

Authorization For Release of Information and Disclaimer

As part of Homecare Services of South Dakota, Inc. employment process, we may be checking your background relative to job and personal references and criminal record. In order to do that, we must have your authorization.

I understand that Homecare Services of South Dakota, Inc. will perform a reference and background check which may include employment, education, motor vehicle, criminal history, worker's compensation records and personal character before considering me for employment. I authorize Homecare Services to: (1) investigate the truthfulness of all statements made on this application; (2) contact my former employers and other listed references or any other persons who can verify information; and (3) discuss the results of any investigation with other employees of Homecare Services involved in the hiring process. I give my consent for all contracted person, firms and corporations, including former employers, to provide information concerning this application, and I release each such person, firm or corporation from liability for providing information to Homecare Services of South Dakota, Inc. I also release Homecare Services of South Dakota, Inc. and its representatives from liability for seeking this information.

I agree to conform to the rules and regulations of Homecare Services of South Dakota, Inc. if I am hired.

I certify that all the information submitted by me on this application is true and complete, and I understand that if any intentional false information, omissions or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated at any time.

Signature: _____ Date: _____

Please return application to address below: