



AT-WILL EMPLOYMENT APPLICATION

PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT. This application is intended to evaluate suitability for employment. It is the policy of the company to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under local, state and federal law. Above & Beyond HomeCare Inc. will comply with its obligation to provide reasonable accommodation to qualified individuals with disabilities. The company conducts pre-employment screening for certain jobs before an offer is made. If a job offer is made, employment may be contingent upon successful completion of a medical examination, which may include providing urine, blood or other types of samples. This application will remain active for ninety (90) days.

PERSONAL INFORMATION					
Name	Last	First	Middle	Social Security Number	
Home Phone			Work Phone		
Please list below your current address and your two other most recent addresses:					
Current	Street	City	State	ZIP	Since (Mo/Yr)
	Street	City	State	ZIP	Since (Mo/Yr)
	Street	City	State	ZIP	Since (Mo/Yr)
EDUCATION					
High School Attended		City, County and State		Did you earn a Diploma?	
Undergraduate College	City, State		Areas of Study	Degree/Certificate/Diploma	
Trade, Business or Other	City, State		Areas of Study	Degree/Certificate/Diploma	
EMPLOYMENT INFORMATION					
Position Applied For:			Date You Can Start Work:		
Do You Prefer: Full Time Part Time			Can You Work: Weekends Evenings		
1) Are you at least 18 years of age and legally eligible for work in the United States?			YES	NO	
2) Will you work weekends when necessary?			YES	NO	
3) Have you received a description of the job or been made aware of the essential functions of the job?			YES	NO	
4) Do you understand the job requirements?			YES	NO (If no, please explain)	
5) Have you ever been discharged or asked to resign from a job? (If yes, please explain)			YES	NO	

Phone: (765) 622-0999

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6) Have you ever been convicted of any criminal offense? (If yes , please explain) YES NO



EMPLOYMENT HISTORY				
MAY WE CONTACT YOUR PRESENT EMPLOYER?		YES	NO	
Please list below your last three employers beginning with the most recent:				
Most Recent Employer	City	State	ZIP	Phone
Position Held	Dates From/To	Pay Rate Upon Leaving \$		Supervisor
Duties		Reason for Leaving		
Next Most Recent Employer	City	State	ZIP	Phone
Position Held	Dates From/To	Pay Rate Upon Leaving \$		Supervisor
Duties		Reason for Leaving		
Next Most Recent Employer	City	State	ZIP	Phone
Position Held	Dates From/To	Pay Rate Upon Leaving \$		Supervisor
Duties		Reason for Leaving		
JOB RELATED SKILLS				
Please answer the following questions if the position you are applying for requires driving a motor vehicle:				
1. Do you have a valid driver's license? YES NO IF YES, Driver's License Number: _____ State of Issue _____ 2. Have you been convicted of or pled guilty to any traffic-related offense within the past five years? 3. Have you had your driver's license suspended or revoked or had your driving privileges modified by a court of law? 4. Please list all states from which you hold or have held a driver's license:				
Have you lived outside the state of Indiana in the last two years? YES NO				
Please use this space to list any special skills you may have that relate to the position:				

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Please list any professional licenses, designations, certifications, etc., that may relate to the position. Include date granted, name of organization and any other relevant information.

- 1.
- 2.
- 3.

APPLICANT'S CERTIFICATION AGREEMENT

1. I authorize the investigation of all statements contained in this application, resume and any attachments. I release from all liability any persons or employers supplying such information. I also release the company from all liability that might result from making the investigation.
2. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts on the application, resume and any attachments (or on any required document) will be cause for denial of employment or immediate termination of employment, regardless of when or how it was discovered.
3. I agree, if I am offered and accept a position, to conform to all existing and future company rules and regulations, and I understand that the company reserves the right to change wages, hours and working conditions as deemed necessary. **I ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, WHICH MEANS THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON.**
4. I understand that any employment offer is contingent upon my providing, within three working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986.
5. I have read and reviewed the information provided in this application and the above statements. By signing this application for employment, I certify that all the information provided by me, including any resumes, test answers or attachments, are truthful and accurate.

Signature

Date

*****THE COMPANY IS AN AT-WILL, EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER*****