

ADULT CARE SERVICES Employment Application

Employees of ACS, and applicants for employment, shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliations, national origin, disability, marital status, gender, or age. Confidential assistance in completing this application may be obtained if needed.

Position _____ Date of application _____

Name _____ Street _____

City _____ State _____ Zipcode _____

Telephone _____ Cell phone _____

Email address _____

Referral Source (Newspaper, walk-in, employee, other) _____

Are you eligible to work in the United States? _____

Work schedule interested in: Days Evenings Nights Weekends

Weekend Nights

Have you ever pleaded guilty or no contest to, or been convicted of a crime? Yes No

If yes, explain _____

SKILLS AND QUALIFICATIONS

Please provide any additional information to further describe your qualifications:

EDUCATION

School Name	No. of Years	Course/Major	Diploma/Degree

EXPERIENCE

Job Title _____ Employer _____

Address _____

Telephone _____ Immediate Supervisor _____

Duties _____

Dates of employment (start) _____ (end) _____

Salary _____ Reason for leaving _____

Job Title _____ Employer _____

Address _____

Telephone _____ Immediate Supervisor _____

Duties _____

Dates of employment (start) _____ (end) _____

Salary _____ Reason for leaving _____

Job Title _____ Employer _____

Address _____

Telephone _____ Immediate Supervisor _____

Duties _____

Dates of employment (start) _____ (end) _____

Salary _____ Reason for leaving _____

REFERENCES

List three business/work references who are not related to you and three personal references.

Name	Title	Relationship	Telephone	# of Years Known

I certify that all information is true and complete. I authorize the employer to contact and an obtain information for all references, former employers, and educational institutions.

Date _____ Applicant Signature _____

NSE/EOE