

Caring Hearts Companions Employment Application

Name _____ Date _____

Address _____
Street Address City State Zip

Home Phone _____ Cell Phone _____

Mailing Address if Different _____

Social Security Number _____ Driver's License State and # _____

Date of Birth: _____ Email Address: _____

How Did You Hear About Caring Hearts Companions? _____

Days Available: _____ Hours Available: _____

What is Your Highest Level of Education? _____ Year: _____ School: _____

Describe Special Training and/or Skills? _____

Have You Ever Been Convicted of a Crime? No Yes _____
Explain

In Case of Emergency, Please Notify: _____

Name Phone Employment History:

1) _____

Employer Address Phone Number

Job Title Dates of Employment Duties

Supervisor Salary Reason for Leaving

2) _____

Employer Address Phone Number

Job Title	Dates of Employment	Duties
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Supervisor	Salary	Reason For Leaving
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3)

Employer	Address	Phone Number
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Job Title	Dates of Employment	Duties
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Supervisor	Salary	Reason for Leaving
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I hereby certify that the above statements are correct and true and I authorize verification by Caring Hearts Companions. I understand that any false statements made in this application may be cause for termination, if hired.

Signature	Date
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EMPLOYEE REFERENCE

FOR: _____ (Supervisor's Name)

Applicant's Name: _____

Company: _____

Dates Employed: _____

Company Address _____

Company Phone _____

This applicant has applied for _____ position and has given you as a reference. We would appreciate your completion of this form found on the bottom part of this page, so that we may evaluate his/her qualification. The information submitted will be confidential. A return envelope is enclosed for your convenience. Prompt attention would be appreciated. We will reciprocate at your request. Thank you. I hereby give my authorization for the release of the information on the reverse side.

Applicant's Signature & Date: _____

*****Please start your comments below*****

Job Title: _____

Date Employed: _____

Reason for Termination, if applicable: _____

Additional comments regarding employee _____

Date & Signature: _____ Title: _____

EMPLOYEE REFERENCE

FOR: _____ (Supervisor's Name)

Applicant's Name: _____

Company: _____

Dates Employed: _____

Company Address _____

Company Phone _____

This applicant has applied for _____ position and has given you as a reference. We would appreciate your completion of this form found on the bottom part of this page, so that we may evaluate his/her qualification. The information submitted will be confidential. A return envelope is enclosed for your convenience. Prompt attention would be appreciated. We will reciprocate at your request. Thank you. I hereby give my authorization for the release of the information on the reverse side.

Applicant's Signature & Date: _____

*****Please start your comments below*****

Job Title: _____

Date Employed: _____

Reason for Termination, if applicable: _____

Additional comments regarding employee _____

Date & Signature: _____ Title: _____