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| PRECISE HOME HEALTHCARE, LLC1200 NW S. Outer Rd, STE 106 BLUE SPRINGS, MO. 64015(816) 295-5171 |  |

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| Applicant Information |  |
| Last Name |  | First |  | M.I. | Date |  |
| Street Address |  | Date of Birth |  |
| City |  | State |  | Zip |  |
| Phone |  | E-mail Address |  |
| Date Available |  | Social Security No. |  | Desired Salary |  |
| Position Applied for |  |
| Are you on the Missouri Disqualification List? | YES  | NO  | If no, are you authorized to work in the U.S.? | YES  |
| Have you ever worked for this company? | YES  | NO  | If so, when? |  |
| 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 |  |
|  |  |
| References |  |
| Please list three professional references that are not related to you. |  |
| Full Name |  | Title |  |
| Company |  | Phone |  |
| Address |  |  |
| Full Name |  | Title |  |
| Company |  | Phone |  |
| Address |  |  |
| Full Name |  | Title |  |
| Company |  | Phone |  |
| Address |  |  |
| Previous Employ--\*ment (last 3 years) |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary | $ |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES  | NO  |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary | $ |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES  | NO  |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary | $ |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES  | NO  |  |
|  |  |
| PLEASE LIST RELATED COURSE WORK, CERTIFICATIONS and ACHIEVEMENTS |  |
|  |  |  |  |  |  |
|  |  |  |  |
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|  |  |
| Disclaimer and Signature |  |
| I certify that my answers are true and complete to the best of my knowledge.If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate release. |  |
| Signature |  | Date |  |

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| Do you have any criminal convictions? | YES  | NO  |  Any findings of guilt, pleas of guilty, pleas of nolo contendere, except for minor traffic offenses? | YES  |
| If yes, please provide details of the offense(s), conviction(s), date(s), and disposition(s) | YES  | NO  | If so, when? |  |
| Have you ever been known by any other name(s) or aliases and/ or used another social security numbers? | YES  | NO  | If yes, explain and provide the other information. |  |

I verify that the statements I have made in this application are true and complete. I understand that it is a “Class A Misdemeanor” to knowingly fail to disclose my criminal history. I understand that if I am hired, any false or incomplete statements in this application will be grounds for immediate discharge. I have read and understand the following statement:

* I hereby acknowledge that if hired, I will be required to register with the Family Care Registry within 15 days of the hire date. Family Care Registry is a complete background check for offenses, which may disqualify an applicant from being hired.
* I hereby consent to a pre-employment criminal record check.
* I hereby consent to a closed records check, pursuant to Section 610.210 RSMO.
* I hereby acknowledge that additional background checks may be conducted.
* I hereby acknowledge that Precise Home Healthcare, LLC is an At-Will Employer.

I hereby acknowledge that this application does not constitute a promise of employment with Precise

Home Healthcare, LLC.

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Applicant Signature Date

|  |  |
| --- | --- |
| additional Employment history |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary |
| Responsibilities |  |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES  | NO  |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary |
| Responsibilities |  |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES  | NO  |  |
| Company |  | Phone |  |
| Address |  | Supervisor |  |
| Job Title |  | Starting Salary | $ | Ending Salary |
| Responsibilities |  |  |
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| Job Title |  | Starting Salary | $ | Ending Salary |
| Responsibilities |  |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES  | NO  |  |