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| PRECISE HOME HEALTHCARE, LLC  1200 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 | | |  |  | | | | | | | | |
| 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 |  | | |