

Senior Care Safe at Home

Sworn Statement of Criminal Convictions

I have been found guilty (convicted) or have pending charges in regard to the following crimes within or without the Commonwealth of Virginia (list charge and date. If none, write NONE).

I affirm that the above listed offenses are the only crimes for which I have been charged or convicted. I understand that in making a materially false statement when providing such affirmation regarding any such offense, I shall be guilty upon conviction of a Class 1 misdemeanor.

Signature _____ **Date** _____

Social Security number _____

Print Name (include middle name) _____

Date of Birth _____

Senior Care Safe at Home

An Equal Opportunity Employer

Date: _____

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, sex, religion, national origin, age, marital or veteran status, the presence of non-job related medical conditions or disabilities or any other legally protected status.

1) Name: _____ Date of Birth: _____

2) Address: _____ City: _____ State: _____

Zip: _____

3) Home phone: () _____ Work Phone: () _____

Social Security #: _____

4) Position for which you are applying: _____

Lowest acceptable wage: \$ _____ per _____

Date you can start: _____

Are you available to work: ___ Full-time ___ Part-time ___ Temp ___ Days ___ Evenings ___ Weekends
___ All

Referred by: ___ Newspaper Ad ___ Recruited ___ Walk-In Other, please list: _____

5) Are you either a U.S. citizen or legally eligible to hold employment in the United States? ___ Yes ___ No

6) Are you at least 18 years old? ___ Yes ___ No If no, birth date: _____

7) Are you related to anyone employed by our company? ___ Yes ___ No

If yes, name of the person, relationship and location employed: _____

8) Have you ever worked for our company? ___ Yes ___ No

If yes, give dates: _____

Location: _____ Supervisor's name: _____

9) LIST HOURS AND DAYS AVAILABLE TO WORK

| | <u>Sunday</u> | <u>Monday</u> | <u>Tuesday</u> | <u>Wednesday</u> | <u>Thursday</u> | <u>Friday</u> | <u>Saturday</u> |
|-------------|---------------|---------------|----------------|------------------|-----------------|---------------|-----------------|
| From (time) | | | | | | | |
| To (time) | | | | | | | |

