|  |  |
| --- | --- |
| CaHoots adult day service, llc  Employment Application | 128 County Road KK, Amherst, WI 54406  715-824-4341  1035 Royalton St, Waupaca, WI 54981  715-802-5002  61 Anne St, Clintonville, WI 54929 |

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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | | | |  | | | | | | | | | | | | | | | | | | First | | |  | | | | | | | | | | | | M.I. | | | | | Date | | | | | |
| Street Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | | | | | |  | | |
| City |  | | | | | | | | | | | | | | | | | | | | | | State | | |  | | | | | | | | | | | | ZIP | |  | | | | | | | | |
| Phone |  | | | | | | | | | | | | | | | | | | | | | | E-mail Address | | | | | |  | | | | | | | | | | | | | | | | | | | |
| SSN |  | | | | | | | | | | | | | | | | | | | | | | DOB (Employees must be 18 or older) | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Date Available | | | | | |  | | | | | | | | | | | | Position Applied For | | | | | | | |  | | | | | | | | | Desired Salary | | | | | | | |  | | | | | |
| Facility Applied For | | | | | | | | | AMHERST WAUPACA CLINTONVILLE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you have a Valid Driver’s License? | | | | | | | | | YES □ | | | | | | NO □ | | | | | DL NO. | | | |  | | | | | | | | | | | Issuing State | | | | | | | | | |  | | | |
| Are you a citizen of the United States? | | | | | | | | | | | | | | | | | YES | | | | NO | | | | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | | | | | | | | YES | | | NO | |
| 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. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | |  | | | | | | | | | | | | | | | | | | | | | | Relationship | | | | | | |  | | | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | | | | | | Phone | | | |  | | | | | | | | | | | | | | | | | |
| Address | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | |  | | | | | | | | | | | | | | | | | | | | | | Relationship | | | | | | |  | | | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | | | | | | Phone | | | |  | | | | | | | | | | | | | | | | | |
| Address | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | |  | | | | | | | | | | | | | | | | | | | | | | Relationship | | | | | | |  | | | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | | | | | | Phone | | | |  | | | | | | | | | | | | | | | | | |
| Address | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous Employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Military Service | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Branch | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | From | | | |  | | To | |  | | | | | | |
| Rank at Discharge | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | Type of Discharge | | | | | | | | |  | | | | | |
| If other than honorable, explain | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 release. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Date | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | PASSING A CAREGIVER BACKGROUND CHECK AND CRIMINAL INQUIRY IS A REQUIREMENT FOR THIS POSITION | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | |