

Please Read Before Completing Employment Application

***Education and work history must be completed even if resume is submitted**

***Valid Driver's License and Social Security card must be turned in prior to hire**

DISCLAIMER OF LIABILITIES

1. I understand that Hosanna Home Care Services is not obligated to provide employment and that I am not obligated to accept employment. Nothing in the application, or in any prior or subsequent oral or written statement, is intended to create any contract of employment or to create any rights in the nature of a contract of employment. I understand that, if I am hired, nothing in this application shall restrict the right of Hosanna Home Care Services to terminate my employment at any time.

2. If I am offered employment, I understand that I may be required to take a post-offer medical examination prior to client contact, in which Hosanna Home Care Services' offer of employment will be conditioned upon my satisfactory completion of this examination. When a post-offer medical examination is required, it will be required of all entering employees in the same job category and the information obtained during the examination will be treated as a confidential medical record. I understand that I may be required to take a pre-employment drug test and understand that any offer of employment by Hosanna Home Care Services will also depend on my satisfactory completion of this test. I consent to taking a pre-employment drug test if asked.

3. I understand that I must pass a pre-employment background check and understand that any offer of employment by Hosanna Home Care Services is contingent upon successful completion of a background check.

4. All applicants must provide a printout of a current Social Security card or State ID at the time of applying. You must bring in the actual Social Security card mailed from the Social

Security Administration, or the actual State ID mailed from the Department of Revenue during the interview. Failure to do so will result in suspension until documents are on file.

5. If I am offered employment that requires driving as an essential function, I understand that the offer may be subject to a current driver's license, proof of insurance, proof of a good driving record and my ability to comply with all driving laws.

6. All Nurse and CNA applicants must provide the Agency with a copy of their certification card at the time of the application. If you do not have your certification card at the time of applying, you must submit your card within 7 days from the date of your application.

7. All employees must have a current TB test and CPR card prior to accepting a client. Failure to provide a current TB test and CPR card will result in suspension until documents are on file. All Nurses must have a current physical on file prior to hire. Failure to provide a current physical will result in suspension until documents are on file.

8. All employees must complete reference forms within 30 days from the date of hire. Failure to provide reference forms will result in suspension until documents are on file.

9. If I am offered employment, I understand that I may work for other companies. However, the time frame that I work for Hosanna Home Care Services cannot conflict with my other job.

10. **Mandatory COVID-19 Vaccination Policy and Acknowledgement:** The health and safety of our employees and their families is our top priority. Due to the ongoing nature of the COVID-19 pandemic, we have decided to require vaccination as a condition of employment. Hosanna Home Care Services will make reasonable accommodations, when possible, for employees who are unable to be vaccinated due to a disability, pregnancy, or sincerely held religious belief. If you believe you qualify for an exception, please contact our Care Coordinator within 3 days from the date you receive the policy and be prepared to provide documentation. Accommodations may include, but are not limited to, one or more of the following: regular testing and continued masking. Employees who choose to not be

vaccinated without an exception approved by our Care Coordinator will be required to turn in weekly negative test no later than Monday of each week. Failure to vaccinate, without approved exception, will result in termination.

Deadlines: Employees hired during this policy will be required to show proof of being fully vaccinated or of getting their first dose, if receiving the Pfizer or Moderna vaccines, prior to accepting a client.

Employees hired during this policy will be required to show proof of getting their second dose, if receiving the Pfizer or Moderna vaccines, within six weeks of getting their first dose.

Documentation: Employees will be required to show proof of vaccination, such as their CDC COVID-19 Vaccination Record Card or the vaccination record maintained by their health care provider. Employees who have lost their card may contact the Immunization Information System (IIS) in Missouri. This documentation will be treated as confidential.

11. The information contained in this application is true to the best of my knowledge. I understand that any misrepresentation of fact, as stated or implied, given in my application, interviews or any other employment form, may be sufficient reason not to hire me and may be for dismissal. I understand and agree that all information furnished in this application will be verified by Hosanna Home Care Services or its authorized representative. I waive any right I may have to notice from any individuals and organizations named or referred to by in this application prior to the release of any employment information to Hosanna Home Care Services. I authorize all individuals in organizations named or referred to in this application and any law enforcement organization to give Hosanna Home Care Services all information relative to such verification and release such individuals, organizations and Hosanna Home Care Services from any and all liability for any claim or damage resulting therefrom.

Name

Date

Acknowledgement of Mandatory COVID-19 Vaccination Policy: I have received and read a copy of Hosanna Home Care Services' Mandatory COVID-19 Vaccination Policy. I understand that failure to comply with this policy, or receive a management-approved exemption, will result in termination.

Name

Date

Acknowledgement of Requirements of New Hire: I acknowledge my responsibility to attend CPR/First Aide Training and receive documentation of course being completed prior to hire. I also acknowledge that I will receive TB testing prior to accepting a client. The applicant is responsible for all costs associated with all testing requirements. All Nurses must provide documentation of having a physical prior to hire. If these documents are not on file with Human Resources within the given time frame, I understand that I will not be able to work with Hosanna Home Care Services.

Name

Date