



## Mahbasi Healthcare – Application

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Desired Hourly Pay Rate: \$ \_\_\_\_\_

### **1. General Information**

1. How did you hear about Mahbasi Healthcare?  
 Referral  
 Online (Indeed, social media, website)  
 Flyer/Brochure  
 Other: \_\_\_\_\_
2. Are you legally authorized to work in the United States?  
 Yes  No
3. Are you at least 18 years of age?  
 Yes  No
4. Do you have reliable transportation to and from client homes?  
 Yes  No

### **2. Experience & Qualifications**

5. What experience do you have in caregiving, home health, or healthcare services?
6. Do you hold any current certifications or licenses? (CNA, HHA, RN, CPR, First Aid, etc.)
7. Are you comfortable assisting with personal care (bathing, toileting, grooming)?  
 Yes  No

8. Are you able to follow a care plan and document services provided accurately?  
 Yes  No

### **3. Availability & Work Preferences**

9. What days and hours are you available to work?  
 Weekdays  Weekends  Nights  Flexible
10. Are you willing to accept assignments with different clients and schedules?  
 Yes  No

### **4. Professional Judgment & Values**

11. How do you handle a difficult or non-cooperative client?
12. What would you do if you noticed a change in a client's condition?
13. Why do you want to work with Mahbasi Healthcare?
14. What does compassion and dignity in caregiving mean to you?

### **5. Compliance & Acknowledgment**

15. Are you willing to undergo a background check and health screening as required by state regulations?  
 Yes  No
16. Can you maintain client confidentiality and follow company policies at all times?  
 Yes  No

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_