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| Personal Information | | | | | | | | | | | | | | | | | |
| Last Name | |  | | | | | First | |  | | | M.I. | | Date | |  | |
| Street Address | | |  | | | | | | | | | Apartment/Unit # | | | |  | |
| City |  | | | | | | State | |  | | | ZIP |  | | | | |
| Phone |  | | | | | | E-mail Address | | |  | | | | | | | |
| Social Security No. | | | | | | | | | | | | | |  | | | |
| Days Availability | | | | M T W TH F S S Days / Weekends / Overnights | | | | | | | | | | | | | |
| 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 been convicted of a felony? | | | | | YES | NO | | | If yes, explain | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| Background Information | | | | | | | | | | | | | | | | | |
| Languages? | |  | | | | | | | | | | | | | | | |
| Willing to work in homes that have pets? | | | | | | | | | | | | | | | | | |
| Do you have any restrictions? | | | | | | | | | | | | | | | | | |
| Years of Experience? | | | | | | | | | | | | | | | | | |
| Background Screening for AHCA? Yes  No | | | | | | | | Immunization for PPD? Yes  No | | | | | | | | | |
| Liability Insurance? Yes  No  If no, you’ll be required to obtain liability insurance. | | | | | | | | | | | | | | | | | |

Tell us what are some of your interest or hobbies that can be shared with a client?

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What do you like about being a companion caregiver?

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Most of our clients need a companion to take them to appointments, events, errands or religious services. We require that you have a valid Driver’s License and up to date car insurance.

Driver’s License #: State Issued: Exp. Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Make & Model of Vehicle: Year of Vehicle:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Auto Insurance Company: Policy#: Exp. Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Some of the duties our companions provide are: laundry, ironing, light housekeeping, meal planning and preparation, dusting and vacuuming, playing games & doing puzzles and help with organizing and more not listed. Are there any duties you are unable or not willing to provide?

Please explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you have any professional licenses and / or certificates? If so, please list. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Previous / current 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 |  | | | |

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|  | | | |
| Disclaimer and Signature | | | |
| Due to the nature of this business, we cannot guarantee the amount of hours / cases we’ll have for you. We try to get cases close to where you live as to limit the distance you’d have to travel.  I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information on this form or during interview may result in my release. | | | |
| Signature |  | Date |  |