

733 Cousins Road Chehalis WA 98532 354 Curtis Hill Road Chehalis WA 98532	☐ A Curtis Hill Estate Adult Family Home LLC ☐ Curtis Hill Manor Adult Family Home LLC	360-523-5498 curtishillestateafh@gmail.com curtishillmanorafh@gmail.com
AFH Employment Application		
Your First Name:		Your Last Name:
Are you legally authorized to work in the US? ' Yes ' No		SSN: optional Are you over age 21? YES / NO
Your Street Address:		
City, State, ZIP:		
Your cell phone number:	Can you receive TXT /SMS? ' Yes ' No	Your email: Emergency Contact:

Your Availability & Current Employment		
You are looking for a: ' Primary job ' PT / Secondary job		When Can You Start?
You prefer: ' Live-in ' Live-out		Duration: ' Short-term ' Long-term (12+ months)
Days and hours you CANNOT work:	' M ' T ' W ' TH ' Fri ' Sat ' Sun Hours:	
Days and hours you CAN work:	' M ' T ' W ' TH ' Fri ' Sat ' Sun Hours:	
Are you currently working? ' Yes ' No		Current Employer:
How long at this job? ____year(s) ____months		Current pay: \$_____ per... ' hr ' day ' month
Can we contact your current employer? ' Yes ' No		Supervisor name: Phone number:
What are (or were) your current responsibilities?		
Why are you leaving your current job?		

Your Qualifications and Credentials				
' First aid	' NA-C (CNA)	' LPN	' RN	' HCA
' CPR	' Dementia Specialty	HCA – Exempt? ' Yes ' No		
' Nursing Delegation	' Diabetes Focus Delegation	COVID-19 Vaccination	' Yes ' No	
' Food Handler's Permit	' Mental Health Specialty	COVID-19 Booster(s)	' Yes ' No	
' Orientation & Safety	' Other:	Date(s):		
' TB Test ' 2-step?	' Other:			

About You			
How do you get to work? ' My own car ' Public transport /Bus ' Get Rides	Can you work weekends? ' Yes ' No	Can you work Holidays? ' Yes ' No	Can you work overtime? ' Yes ' No

Do you have any mental, emotional, physical, medical, or ANY other conditions or restrictions that might prevent you from performing regular caregiver duties?	' Yes ' No	If YES, please explain:
Have you ever been convicted of a felony?	' Yes ' No	If YES, explain:
Have you ever been accused of abuse, neglect, or theft?	' Yes ' No	If YES, explain:
What would be a good reason for you to miss your scheduled shift?		
What would be a good reason for you to quit without notice?		
Can you safely lift 55-lbs using proper body mechanics?	' Yes ' No	
Rate your skill level with transferring & body mechanics...	' Can't do ' Average ' good ' above avg.	
Rate your skill level working with confused residents...	' Can't do ' Average ' good ' above avg.	
Rate your skill level with cooking Caucasian food...	' Can't do ' Average ' good ' above avg.	
Rate your ability to work well and get along with coworkers...	' Can't do ' Average ' good ' above avg.	
If we asked a former patient to describe you, in a few words, what would he/she say?		
How many workdays have you missed in the last 6 months?	Missed ____ days. Why?	

Previous Employment & References MUST COMPLETE					
Have you worked in an AFH before? ' Yes ' No		How many clients? = ____	How many staff on duty? = ____		
Previous Employers	Supervisor name	Supervisor phone	Start date	End date	Pay / Salary
AFH					
NH					
AL					
1-1					
AFH					
NH					
AL					
1-1					
AFH					
NH					
AL					
1-1					
What do you feel you can bring to this company? Why should we hire you?					

EMPLOYMENT APPLICATION DISCLAIMER & REFERENCES CHECK 1. I certify that the information contained in this application is true and correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired. 2. I authorize any person, organization, or company listed on this application to furnish you with any and all information concerning my previous employment, education, and qualifications for employment. 3. I authorize Curtis Hill Estate Adult Family Home to request and receive such information. In consideration for my employment, I agree to abide by the rules and regulations of your company, which rules may be changed, withdrawn, added or interpreted at any time, at our company's sole discretion and without prior notice to me. 4. I acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn at any time, with or without cause, and with or without prior notice at the option of your company or myself. 5. I understand that upon a job offer, I will be required to fill out the US Employment Eligibility form I-9 to verify that I am eligible for legal employment in the US. Applicant Signature: _____ Date: _____
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