

# COMMUNITY HOME CARE EMPLOYMENT APPLICATION

## PERSONAL INFO

FIRST NAME: \_\_\_\_\_ MIDDLE INT: \_\_\_\_\_ LAST NAME: \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_  
DOB: \_\_\_/\_\_\_/\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DRIVERS LICENSE# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ST: (\_\_\_\_\_)  
Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_  
Criminal Conviction: Circle: No / Yes: Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EDUCATION

HIGH SCHOOL: \_\_\_\_\_ PHONE: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: (\_\_\_\_\_)  
MAJOR STUDY: \_\_\_\_\_  
STARTED: \_\_\_/\_\_\_/\_\_\_ GRADUATION DATE: \_\_\_/\_\_\_/\_\_\_

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COLLEGE: \_\_\_\_\_ PHONE: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: (\_\_\_\_\_)  
MAJOR STUDY: \_\_\_\_\_  
STARTED: \_\_\_/\_\_\_/\_\_\_ GRADUATION DATE: \_\_\_/\_\_\_/\_\_\_

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TRADE SCHOOL: \_\_\_\_\_ PHONE: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: (\_\_\_\_\_)  
MAJOR STUDY: \_\_\_\_\_  
STARTED: \_\_\_/\_\_\_/\_\_\_ GRADUATION DATE: \_\_\_/\_\_\_/\_\_\_

**EMPLOYMENT HISTORY**

COMPANY NAME: \_\_\_\_\_ PHONE#: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: (\_\_\_\_)

JOB TITLE: \_\_\_\_\_ SALARY: \_\_\_\_\_ HR / YR

JOB DISCRPTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

START DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ SEPARATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

REASON SEPARATED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CAN WE CONTACT THIS EMPLOYER? CIRCLE: YES / NO

COMPANY NAME: \_\_\_\_\_ PHONE#: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: (\_\_\_\_)

JOB TITLE: \_\_\_\_\_ SALARY: \_\_\_\_\_ HR / YR

JOB DISCRPTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

START DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ SEPARATION DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

REASON SEPARATED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CAN WE CONTACT THIS EMPLOYER? CIRCLE: YES / NO

COMPANY NAME: _____	PHONE#: ____ - ____ - ____
STREET ADDRESS: _____	CITY: _____ STATE: (____)
JOB TITLE: _____	SALARY: _____ HR / YR
JOB DISCRPTION: _____ _____	
START DATE: ____/____/____	SEPARATION DATE: ____/____/____
REASON SEPARATED: _____ _____	
CAN WE CONTACT THIS EMPLOYER? CIRCLE: YES / NO	

  

COMPANY NAME: _____	PHONE#: ____ - ____ - ____
STREET ADDRESS: _____	CITY: _____ STATE: (____)
JOB TITLE: _____	SALARY: _____ HR / YR
JOB DISCRPTION: _____ _____	
START DATE: ____/____/____	SEPARATION DATE: ____/____/____
REASON SEPARATED: _____ _____	
CAN WE CONTACT THIS EMPLOYER? CIRCLE: YES / NO	

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT ANY FALSE STATEMENTS FOUND WHETHER KNOWN OR UNKNOWN WILL BE GROUNDS FOR TERMINATION.

APPLICANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

**MANAGEMENT USE ONLY**

Hired ____ Wage: \$____. ____ Hr/Yr Start Date: ____/____/____ Authorized by: _____
Reason for not hiring: _____

**Mailing Address: 3600 CONSHOHOCKEN AVE BOX 1806, PHILA, PA. 19131**

# COMMUNITY HOME CARE

## Direct Deposit Authorization Form

**Employee Name:** \_\_\_\_\_

**Employee Social Security#** \_\_\_\_\_

**Employee Birth Date:** \_\_\_\_\_

<b>Bank Name</b>	<b>Checking/Savings</b>	<b>Routing #</b>	<b>Account #</b>

**Employee Signature:** \_\_\_\_\_

**Date:** \_\_\_/\_\_\_/\_\_\_

**Return to supervisor**