



HEARTS WITH INTEGRITY
 603 E North St, Hartford City, IN 47348
 Phone (765) 347-8110 FAX (765) 276-4795

APPLICATION FOR EMPLOYMENT

Name					Date		
Address			Apt	City		State	Zip
Home phone ()		Cell Phone ()		Work phone ()			
E-mail		Social Security # - -					
Position for which you are applying							
Lowest acceptable wage: \$ per				Date you can start:			
Are you available to work: Full-time Part-time Temp Days Evenings Weekends All							
Referred by: Newspaper Ad Recruited Walk-In Other, please list:							
Are you either a U.S. citizen or legally eligible to hold employment in the United States? Yes No							
Are you at least 18 years old? Yes No							
Are you related to anyone employed by our company? Yes No If Yes, Who?							
Have you ever worked for our company? Yes No If yes, give dates:							
LIST HOURS AND DAYS AVAILABLE TO WORK CAN YOU WORK A 24 HOUR DAY? Yes No							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From (time)							
To (time)							
List hours you can NOT work							
EDUCATION Type of School	Name and Address of School					Diploma or Degree	Major or Course of study
High School	Name _____ Street _____ City _____ State ____ Zip _____ _____					Yes No	Year Graduated
College	Name _____ Street _____ City _____ State ____ Zip _____ _____					Yes No	
Technical, trade, grad school or other	Name _____ Street _____ City _____ State ____ Zip _____ _____					Yes No	

List Training & special skills (i.e. cooking, teaching or C.N.A. license)	_____	_____	Is Indiana C.N.A. License in effect? Y N
	_____	_____	
	_____	_____	
	_____	_____	

List any additional or special education, training, skills, educational courses or workshops which may be relevant to your application:

If required, do you have a valid, current health care License, Registration or Certification in Indiana? # _____ Exp. Date: _____

If not, have you applied? Yes No Do you have a Temporary License? Yes No

Any other state(s)? Yes No (if yes, please name) _____

Has your License ever been denied, surrendered, suspended or revoked? Yes No If so, please explain: _____

Have there been any restrictions placed on your license? Yes No If so, please explain: _____

Languages that you speak, other than English _____

Are you able to perform the essential functions of the position with or without accommodations?: Yes No

What can be done to accommodate your limitation? _____

Indiana Law prohibits Home Health agencies from employing a person to provide services in a patient's or client's residence if that person's limited criminal history indicates that the person has been convicted of any of the following:

1. Rape (IC 35-42-4-1)
2. Criminal deviate conduct (IC 35-42-4-2)
3. Exploitation of an endangered adult.(IC 35-46-1-12)
4. Failure to report battery, neglect, or exploitation of an endangered adult (IC 35-46-1-13)
5. Theft, if the conviction occurred less than ten (10) years before the person's employment application date (IC 35-43-4).

Have you ever been convicted of the any of the 5 listed offenses above? Yes No

Have you ever been convicted (found guilty) of attempting or committing any crime other than a minor traffic violation?

Yes No. If yes, when? _____ For What? _____

Note: Other than the 5 listed prohibited offenses listed above, a conviction record will not necessarily bar individuals from employment. You are not required to reveal records which have been judicially expunged, sealed, or eradicated.

Mantoux testing is mandatory, both for your protection as well as our client's. The Mantoux tuberculin skin test has been the standard method for detecting latent TB infection since the 1930s. The skin test is used to evaluate people for latent TB infection. It's primarily used in two situations. First, it's used in contact investigations to test close contacts of people who have active TB disease. Second, it's used as part of targeted testing activities in various groups of people who are at high risk for TB, such as health care workers who serve high-risk clients, residents and employees of correctional facilities, and foreign-born people from areas that have a high TB incidence. Have you been tested recently? _____ When? _____

Have you had a physical within the last 180 days? Yes No When _____

Are you a smoker? - Yes No Can you work client's home that smokes? Yes No

Do you have your own vehicle? Yes No Can you drive Clients? Yes No

Drivers License # _____ State _____

Do you have full coverage liability auto insurance (100,000/300,000)? Yes No

Are you allergic to animals? Yes No If yes, what animals?

READ CAREFULLY BEFORE SIGNING

I hereby certify, to the best of my knowledge that the answers given are true and complete. I also understand that an omission or falsification may disqualify me from consideration for employment or may be grounds for my immediate dismissal. I agree to conform to the rules and regulations of the company and, if employed, I understand and agree that my employment is at-will and that no employment contract rights have been created. I also understand and agree that my employment may be terminated at any time with or without cause, and with or without advance notice at the option of either the company or myself. I understand that no supervisor, manager, or other representative of the company has any authority to enter into any express or implied contract for employment for any specific period of time. Any agreement contract to the above must be in writing and expressly state that it is a contract and be signed by the authorized representative of the company. I agree to a physical examination, if requested, and understand that failure to meet any medical and/or health requirements for the position will prevent my employment with the company. I also understand that employment, for certain positions, is conditional upon successful completion of a substance abuse screening test as part of the company's pre-employment policy.

Employee Acknowledgment _____ Dated _____
(Must be signed in the presence of an Hearts With Integrity Representative)

Hearts With Integrity Representative _____ Dated _____
(Witness)

Hearts With Integrity, LLC. Considers applicants for all positions without regard to race, color, sex, religion, national origin, age, marital or veteran status, the presence of non-job related medical conditions or disabilities or any other legally protected status.

THIS APPLICATION WILL REMAIN ACTIVE FOR 12 MONTHS. APPLICANTS WHO WISH TO BE CONSIDERED AFTER THAT TIME MUST REAPPLY.

Applicant Work History

List Your Current or Most Recent Employer First

Present and previous employers – Will be contacted as reference checks

COMPANY #1

Company Name: _____ Position/Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Dates Employed From: (month/year): _____ To: (month/year) _____

Supervisor's Name: _____ Title: _____ Phone Number: _____

Starting Rate of Pay :\$ _____ per _____ Last rate of pay: \$ _____ per _____

Responsibilities: _____

Reason for Leaving: _____

If time elapsed between positions, please explain: _____

COMPANY #2

Company Name: _____ Position/Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Dates Employed From: (month/year): _____ To: (month/year) _____

Supervisor's Name: _____ Title: _____ Phone Number: _____

Starting Rate of Pay :\$ _____ per _____ Last rate of pay: \$ _____ per _____

Responsibilities: _____

Reason for Leaving: _____

COMPANY #3

Company Name: _____ Position/Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Dates Employed From: (month/year): _____ To: (month/year) _____

Supervisor's Name: _____ Title: _____ Phone Number: _____

Starting Rate of Pay :\$ _____ per _____ Last rate of pay: \$ _____ per _____

Responsibilities: _____

Reason for Leaving: _____

COMPANY #4

Company Name: _____ Position/Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Dates Employed From: (month/year): _____ To: (month/year) _____

Supervisor's Name: _____ Title: _____ Phone Number: _____

Starting Rate of Pay :\$ _____ per _____ Last rate of pay: \$ _____ per _____

Responsibilities: _____

Reason for Leaving: _____

