

OUR APPLICATION POLICIES

- Applicants must use one of our forms.
- Applications missing critical information will not be considered.
- Applications will be considered “active” for a period of 90 days from the date they were initially signed.
- Interviews will be held by appointment only.
- We do check references!

PLEASE NOTE

- All applicants offered a position agree to comply with the provision of our DRUG and ALCOHOL testing policy and understand that violations of the policy will be considered willful misconduct and will result in discipline up to and including termination of employment.
- All applicants will be required to pass a pre-employment physical, including a Mantoux TB test. **This is a requirement of our state licensing regulations.**
- All applicants offered a position that requires driving will be required to have a valid driver’s license and will be subject to an annual check of their driving record.
- All applicants offered a position will be required to successfully complete a criminal background check. **This is a requirement of our state licensing regulations.**
- All applicants who have not been a resident of the State of Pennsylvania for the past two consecutive years will be required to successfully complete and FBI fingerprint background check. **This is a requirement of our state licensing regulations.**
- All applicants must possess a high school diploma or GED. **This is a requirement of our state licensing regulations.**

I understand and agree to the above:

Print Name: _____

Signature: _____

Date: _____

NOTE TO APPLICANTS FEDERAL AND STATE LAW REQUIRES THAT ALL APPLICATIONS BE CONSIDERED WITHOUT REGARD TO RACE, RELIGION, COLOR, SEX, AGE OR NATIONAL ORIGIN. WE BELIEVE IN AND FULLY SUPPORT THE PRINCIPLE OF EQUAL EMPLOYMENT OPPORTUNITY AND WILL FULFILL OUR OBLIGATION TO THE FULLEST.

PERSONAL DATA

NAME _____ SOCIAL SECURITY NO. _____
LAST FIRST MIDDLE

PRESENT ADDRESS _____
STREET CITY STATE ZIP CODE

TELEPHONE NUMBER _____ HOW LONG HAVE YOU LIVED AT PRESENT ADDRESS? _____

PREVIOUS ADDRESS _____ HOW LONG? _____
STREET CITY STATE ZIP CODE

HAVE YOU LIVED IN THE STATE OF PENNSYLVANIA AT LEAST THE PAST 2 YEARS? _____ (Information required per state licensing regulations)

POSITIONS APPLIED FOR: _____ WORK SCHEDULE DESIRED: _____ FULL TIME

DAY PROGRAM _____ PART TIME

RESIDENTIAL PROGRAM _____ SOCIAL/REC PROGRAM _____

RATE OF PAY EXPECTED: START _____ 6 MO. _____ 1 YEAR _____

HOW DID YOU HEAR OF THIS OPENING? _____

HAVE YOU WORKED WITH US BEFORE? _____ NO _____ YES – IF YES, WHEN/HOW LONG? _____

PREVIOUS JOB TITLE W/HELPING HANDS (if applicable) _____ REASON FOR LEAVING _____

LIST ANY FRIENDS/RELATIVES WORKING WITH US NOW _____

LIST ANY SPECIAL SKILLS YOU HAVE WHICH MAY BE USEFUL FOR POSITIONS APPLIED FOR ABOVE _____

IMPORTANT: A CHECK INDICATES THE INFORMATION IS NEEDED FOR BONA FIDE JOB QUALIFICATIONS OR OTHER LEGALLY PERMISSIBLE REASONS.

- ✓ ARE YOU OVER 21? _____ YES _____ NO (If NO, hire is subject to minimum legal age verification)
- ✓ HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ NO _____ YES
- ✓ IF YES, PLEASE LIST CONVICTIONS _____
- ✓ DO YOU HAVE ANY PHYSICAL HANDICAPS PREVENTING YOU FROM DOING CERTAIN TYPES OF WORK?
- ✓ _____ NO _____ YES IF YES, DESCRIBE HANDICAP/LIMITATIONS _____
- ✓ DO YOU HAVE ANY RESTRICTIONS THAT WOULD PREVENT YOU FROM LIFTING? YES _____ NO _____

ALL HELPING HANDS EMPLOYEES ARE REQUIRED TO COMPLY WITH THE FOLLOWING PRE-EMPLOYMENT REQUIREMENTS:

- ❖ PASS A PRE-EMPLOYMENT DRUG SCREENING
- ❖ PASS A PRE-EMPLOYMENT PHYSICAL AND MANTOUX TB TEST
- ❖ PASS A CRIMINAL RECORD BACKGROUND CHECK
- ❖ AN FBI BACKGROUND CHECK, IF NOT A RESIDENT OF PENNSYLVANIA FOR AT LEAST THE PAST 2 YEARS
- ❖ POSSESS A HIGH SCHOOL DIPLOMA OR GED

EMPLOYMENT DATA

LIST LAST 3 PREVIOUS EMPLOYERS BEGINNING WITH MOST RECENT/CURRENT EMPLOYER. LIST (1) COMPANY NAME; (2) STREET ADDRESS (3) CITY/STATE & ZIP CODE; (4) CONTACT PERSON WITH PHONE NUMBER; (5) INCLUDE POSITION HELD; DURATION OF EMPLOYMENT AND REASON FOR LEAVING

1 _____
2 _____
3 _____
4 _____
5 _____

1 _____
2 _____
3 _____
4 _____
5 _____

1 _____
2 _____
3 _____
4 _____
5 _____

REFERENCES:

May we contact the employer at the phone number given?
Check if YES _____, if NO, leave blank.

BUSINESS REFERENCES

NAME	ADDRESS	POSITION	PHONE NUMBER
1.			
2.			
3.			

APPLICANT: READ AND SIGN BELOW

The information provided by me in this application for employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal. You are hereby authorized to conduct any investigation of my personal and professional history.

SIGNATURE OF APPLICANT

DATE OF APPLICATION

EDUCATIONAL HISTORY

LIST EDUCATIONAL INSTITUTION(S) BELOW:

NAME AND ADDRESS OF SCHOOL	CIRCLE LAST GRADE/YEAR COMPLETED	GRADUATED?	DEGREE/MAJOR GRADE POINT AVERAGE
HIGH SCHOOL	9 10 11 12	<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE	1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
OTHER		<input type="checkbox"/> YES <input type="checkbox"/> NO	

EXPLAIN ANY SPECIALIZED TRAINING, ADDITIONAL SCHOOLING OR EDUCATIONAL AWARDS _____

THIS SECTION PERTAINS TO THE ATTACHED LIST OF PROHIBITIVE OFFENSES CONTAINED IN ACT 169 AS AMENDED BY ACT 13 OF THE OLDER ADULTS PROTECTIVE SERVICES ACT. PLEASE REVIEW THE ATTACHED LIST AND COMPLETE THE CONFIRMATION SECTION BELOW.

I have reviewed the attached list of prohibitive offenses and, by signing below I am attesting that I have not been convicted of any of them, either in or out of the State of Pennsylvania. In addition, I have disclosed to Helping Hands, Inc. any criminal history, whether on the attached list or not.

I understand that failure to disclose any criminal convictions may result in immediate termination, if employed, or may eliminate me from consideration for employment if submitting an application.

Print Name: _____

Signature: _____

Date: _____

Signature of Interviewer: _____

Date: _____