



Documents Needed For Hire

- Proof of car insurance (registration showing insured status) if applicable**
- PPD and Physical within 1 year**
- Identification: Driver's license (current)
2 forms of identifications**
- Current copy of professional license**
- Training certificate (CNA/HHA)**
- Immigration documents in order (if applicable)**

EMERGENCY CONTACT INFORMATION - Please Print Clearly

Name: _____

Relationship: _____

Home Phone Number: (_____) _____

Work Phone Number: (_____) _____

Cell Phone Number: (_____) _____

A Better Life Homecare LLC an equal opportunity employer. All applicants and employees are considered for employment, advancement, and development based upon their skills, performance and potential. No current or prospective employee will be discriminated against because of race, creed, color, gender, age, national origin, handicap or military status.

Employment History - Please begin with your most recent or current place of employment.

Place of Employment: _____ Start Date: _____
Address: _____ End Date: _____
Position: _____ Phone Number: (____) _____
Supervisor: _____ Salary: _____
Reason for Leaving: _____ Final Salary: _____

Place of Employment: _____ Start Date: _____
Address: _____ End Date: _____
Position: _____ Phone Number: (____) _____
Supervisor: _____ Salary: _____
Reason for Leaving: _____ Final Salary: _____

Place of Employment: _____ Start Date: _____
Address: _____ End Date: _____
Position: _____ Phone Number: (____) _____
Supervisor: _____ Salary: _____
Reason for Leaving: _____ Final Salary: _____

Education Name & Location Course of Study Years Completed Date Graduated
High School: _____
College: _____
Other: _____
Other: _____
Military Service
Branch of Service: _____ Dates of Service: _____
Highest Rank Achieved: _____ Currently in a Reserve Unit? Yes / No _____
Special Schooling and/or Duties: _____

Licenses and Certifications

License or Certification	ID Number	Expiration Date	State
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Criminal History

Have you ever been convicted of violating any law? (Please omit minor traffic violations.)
 Yes No if yes, please list conviction(s), date(s) and location(s). The presence of a criminal record is not an automatic rejection of your application. Certain types of convictions will eliminate you from servicing vulnerable elders in their homes. I attest that the above referenced information is true and accurate to the best of my knowledge. I further give the agency permission to call any of my cited previous employers or reference candidate for information regarding my character, employment history or work ethics.

Employee Candidate Signature

Date

Availability List

EMPLOYEE NAME: _____

Phone # _____ Cell Phone # _____

DATE OF HIRE (date of orientation): _____

I am available at the following days and / or hours:

AVAILABLE	FROM	TO
Mon		
Tues		
Weds		
Thurs		
Fri		
Sat		
Sun		

ONLY check towns you are willing to travel to

<input type="checkbox"/> Agawam	<input type="checkbox"/> East Hampton	<input type="checkbox"/> Ludlow	<input type="checkbox"/> Shrewsbury
<input type="checkbox"/> Amherst	<input type="checkbox"/> Fall River	<input type="checkbox"/> Lynn	<input type="checkbox"/> South Hadley
<input type="checkbox"/> Athol	<input type="checkbox"/> Fitchburg	<input type="checkbox"/> Milford	<input type="checkbox"/> Southampton
<input type="checkbox"/> Auburn	<input type="checkbox"/> Franklin County	<input type="checkbox"/> Monson	<input type="checkbox"/> Southwick
<input type="checkbox"/> Belchertown	<input type="checkbox"/> Granby	<input type="checkbox"/> New Bedford	<input type="checkbox"/> Springfield
<input type="checkbox"/> Berkshire County	<input type="checkbox"/> Greenfield	<input type="checkbox"/> North Adams	<input type="checkbox"/> Sunderland
<input type="checkbox"/> Brimfield	<input type="checkbox"/> Hadley	<input type="checkbox"/> Northampton	<input type="checkbox"/> Ware
<input type="checkbox"/> Brockton	<input type="checkbox"/> Hampden	<input type="checkbox"/> Northfield	<input type="checkbox"/> Warren
<input type="checkbox"/> Boston	<input type="checkbox"/> Hatfield	<input type="checkbox"/> Orange	<input type="checkbox"/> West Springfield
<input type="checkbox"/> Chicopee	<input type="checkbox"/> Holyoke	<input type="checkbox"/> Palmer	<input type="checkbox"/> West Hampton
<input type="checkbox"/> Cambridge	<input type="checkbox"/> Leominster	<input type="checkbox"/> Pelham	<input type="checkbox"/> Wilbraham
<input type="checkbox"/> Deerfield	<input type="checkbox"/> Longmeadow	<input type="checkbox"/> Pittsfield	<input type="checkbox"/> Worcester
<input type="checkbox"/> East Longmeadow	<input type="checkbox"/> Lowell	<input type="checkbox"/> Shelburne Falls	