

Each question should be fully and accurately answered. PLEASE PRINT, except for signature at the end of this application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

\_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
 Last Name First Name Middle Initial Telephone Number

Street Address	City	State	Zip Code
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Are you 18 years of Age or older? Yes ☐ No ☐

Social Security \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Have you ever applied here before?    Yes ☐ No ☐    If yes, when \_\_\_\_\_

Were you ever employed here?    Yes ☐ No ☐    If yes, when \_\_\_\_\_

Disclose all criminal convictions, findings of guilt, plea of guilt and pleas of nolo contendere exempt minor traffic offenses. \_\_\_\_\_

List/disclose all aliases and Social Security numbers you have ever used.

	-	-		-	-
	-	-		-	-

List information of employers in consecutive order with present employer listed first

Name	Job Title and Duties	Phone

## List schooling information

	LIST NAME AND ADDRESS OF SCHOOL	# of years completed	Diploma/Degree/Certificate
High School or GED	_____	_____	_____
College or University	_____	_____	_____
Technical	_____	_____	_____

Are you presently employed?    Yes ☐ No ☐

**Give three references**

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

By signing below this job application, I(applicant) give the consent to Saint Louis Caregivers LLC to a close record check pursuant to Section 610.120, RSMO, and the consent to a pre-employment criminal background check. I certify that all information provided in this employment application is true and complete. I understand that this application does not guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated any time, with or without cause and with or without notice. I have read, understood, and by my signature consent to these statements.

Signature: \_\_\_\_\_ Date:\_\_\_\_\_