



# PACIFIC HEALTH SYSTEMS

PRIVATE HOMECARE SERVICES

## Employment Application

### Applicant Information

**Full Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*Last First M.I.*

**Address:** \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Date Available:** \_\_\_\_\_ **Social Security No.:** \_\_\_\_\_ **Desired Salary:** \$ \_\_\_\_\_

**Position Applied for:** \_\_\_\_\_

**Are you a citizen of the United States?** YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

**Have you ever worked for this company?** YES ☐ NO ☐ If yes, when? \_\_\_\_\_

**Have you ever been convicted of a felony?** YES ☐ NO ☐

If yes, explain: \_\_\_\_\_

### Education

**High School:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Did you graduate?** YES ☐ NO ☐ **Diploma:** \_\_\_\_\_

**College:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Did you graduate?** YES ☐ NO ☐ **Degree:** \_\_\_\_\_

**Other:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_ **Did you graduate?** YES ☐ NO ☐ **Degree:** \_\_\_\_\_

### References

**Please list three professional references.**

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

### Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES ☐ NO ☐

### Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

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