

EMPLOYMENT APPLICATION

I AM UNIQUE SPECIAL CARE AND CASE MANAGEMENT, INC.

A Home Care Agency Co-op

Name: _____ Date: _____

Maiden: _____ Prefix: (Mr.) (Mrs.) (Ms.) Suffix: _____

Home Address: _____ Phone #1: (_____) _____

City: _____ State: _____ Zip _____ Phone #2: (_____) _____

RN or LPN: _____ Social Security #: _____ Date of Birth: _____

Hours Desired per week: _____ Shift Preferences: _____, _____, _____ Date Available to Start: _____

Primary Nursing License # _____ State: _____ License Expiration Date: _____

Licenses Held in Other States: Number: _____ State: _____ Expiration Date: _____

Number: _____ State: _____ Expiration Date: _____

Are you a U.S.Citizen or Alien Authorized to work in the United States? Yes _____ No _____

Green Card Number _____ Date: _____

Do you have a car? Yes _____ No _____ Insurance Carrier: _____

Driver's License #: _____ State Issued: _____ Expiration Date: _____

(Further proof of insurance will be requested if you are required to drive a client.)

In case of emergency notify: _____ Phone (_____) _____

Address: _____ Relationship: _____

City _____ State _____ Zip _____

WORK HISTORY

Employer: _____ Phone: _____ Position: _____
Address: _____ Dates: From: _____ To: _____
Duties: _____

Salary _____ Supervisor: _____ Title: _____
Reason for Leaving: _____

Employer: _____ Phone: _____ Position: _____
Address: _____ Dates: From: _____ To: _____
Duties: _____

Salary _____ Supervisor: _____ Title: _____
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Employer: _____ Phone: _____ Position: _____
Address: _____ Dates: From: _____ To: _____
Duties: _____

Salary _____ Supervisor: _____ Title: _____
Reason for Leaving: _____

EDUCATION

High School: _____ Location: _____ Graduate? _____

College: _____ Location: _____ Graduate? _____

If NO, how many years attended? _____

Trade, or
Business School: _____ Location: _____ Graduate? _____

If NO, how many years attended? _____

Special Study or Research Work: _____

U.S. Military Service? _____ Rank: _____ Present Member of National Guard or Reserves? _____

Have you ever been convicted of a crime other than a minor traffic violation? _____ Yes _____ No

Do you have any criminal charges pending? _____ Yes _____ No

Have you ever been convicted of a moving traffic violation? _____ Yes _____ No

In what year did you become a legal resident of North Carolina? _____



"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT. IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED. MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY. BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE."

Date: _____ Signature: _____

_____ I give I Am Unique permission to post any pictures that are taken of me, during company events, on the premises of I Am Unique, in the client's home, or on our website.

_____ I DO NOT give I Am Unique permission to post any pictures that are taken of me, during company events, on the premises of I Am Unique, in the client's home, or on our website.