



# 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: \_\_\_\_\_

How many hours can you work? \_\_\_\_\_ Can you work nights? \_\_\_\_\_ Full-Time \_\_\_ Part-Time \_\_\_ Both \_\_\_

Days available to work/Monday \_\_\_ Tuesday \_\_\_ Wednesday \_\_\_ Thursday \_\_\_ Friday \_\_\_ Saturday \_\_\_ Sunday \_\_\_

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  \* Due to the nature of services provided, TNPLH is prohibited from hiring felony offenders whose offense occurred less than 7 years prior to application date.

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: \_\_\_\_\_

## 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.*

*TNPLH is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this company depends solely on your qualifications.*

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

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



## PRE-EMPLOYMENT BACKGROUND CHECK AUTHORIZATION

I, \_\_\_\_\_, understand that as part of the employment process, There' No Place Like Home needs to complete a background check on me regarding:

- |                                      |  |
|--------------------------------------|--|
| 1. Criminal record;                  | 6. Motor Vehicle Records;                        |
| 2. Sex and Violent Offenders Record; | 7. Personal/Professional Reference Verification; |
| 3. Employment Verification;          | 8. Medical Suitability                           |
| 4. Education Verification;           | 9. Drugs/Alcohol                                 |
| 5. License Verification;             |  |

- I authorize all federal and state agencies, persons and organizations that may have information relevant to this research to disclose such information to There' No Place Like Home or its authorized agent(s).
- I understand that this authorization is to be part of the written and signed employment application.
- I understand that I do not have the right to request a background check be done on my behalf, and my employment application will not be processed further.
- I understand that I have specific rights under the federal Fair Credit Reporting Act (FCRA) and may have additional rights under relevant State law.
- I further authorize that a photocopy of this authorization may be considered as valid as the original.
- I hereby certify that all statements on this form are true and correct to the best of my knowledge and belief. I understand that employment with There' No Place Like Home is contingent upon successful completion of a background check.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Full Name \_\_\_\_\_ Telephone No. \_\_\_\_\_

Former Name(s) and Date(s) used: \_\_\_\_\_

Current Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Current Driver License: \_\_\_\_\_ State \_\_\_\_\_

List any other cities, states and dates of residency during last 10 years (Use back of sheet, if necessary.)

City	State	From: Month/Year	To: Month/Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



## Five Year Work History

We are required to obtain at least a Five Year Work History on all of our employees. Please list below any previous employment held within the past five years in addition to what you already listed on the Employment Application.

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Signature

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Date

Name and Address of Previous Employee	Employee Dates ( Month/ Year)	Reason for Leaving



# Telephone Reference Check Form

## Applicant Information

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

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

Recruiter Name: \_\_\_\_\_

## Contact Information

Name of Contact: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Suite #*

*City State ZIP Code*

I, \_\_\_\_\_, release said person, school, companies, government agencies, court and law enforcement authorities from any damage whatsoever for releasing this information.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

## Reference Comments

Was the applicant an employee of your company? \_\_\_\_\_  
 YES NO

When? Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Pay Rate: \$ \_\_\_\_\_ hourly/ biweekly

\_\_\_\_\_  
 \_\_\_\_\_

	Excellent	Good	Satisfactory	Unsatisfactory	Unable to evaluate
Quality of work					
Attendance Record					
Dependability					
Working relationship with Client					
Skills related to job					

Would you rehire this applicant? YES NO

Is there anything else you would like to add?



# Telephone Reference Check Form

## Contact Information

Name of Contact: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Street Address \_\_\_\_\_ Suite # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

## Reference #2 Comments

Was the applicant an employee of your company? YES  NO

When? Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Pay Rate: \$\_\_\_\_\_ hourly/ biweekly

\_\_\_\_\_ last day of employment?

\_\_\_\_\_

	Excellent	Good	Satisfactory	Unsatisfactory	Unable to evaluate
Quality of work					
Attendance Record					
Dependability					
Working relationship with Client					
Skills related to job					

Would you rehire this applicant? YES  NO

Is there anything else you would like to add?



## Telephone Reference Check Form

### Contact Information

Name of Contact: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Street Address \_\_\_\_\_ Suite # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

### Reference #3 Comments

Was the applicant an employee of your company? YES  NO

When? Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Pay Rate: \$\_\_\_\_\_ hourly/ biweekly

t t t t t t f t \_\_\_\_\_

t r t t r t \_\_\_\_\_

	Excellent	Good	Satisfactory	Unsatisfactory	Unable to evaluate
Quality of work					
Attendance Record					
Dependability					
Working relationship with Client					
Skills related to job					

Would you rehire this applicant? YES  NO

Is there anything else you would like to add?