

ABC CARE, INC.

Employment Application
 2815 Patapsco Road Finksburg MD 21048
 (410) 751-3700 Fax (410) 751-3702
 Web site www.abccareinc.com
 Email abccare@abccareinc.com



APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Are you 16 years of age or older?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you 20 years of age or older?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you have your own transportation to and from work?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	

EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

PLEASE CHECK OFF COMPLETED TRAININGS AND COLLEGE COURSES:

First Aid Certified	YES <input type="checkbox"/>	NO <input type="checkbox"/>	CPR Certified	YES <input type="checkbox"/>	NO <input type="checkbox"/>
School Age Child Care Class	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Child Care Administration Class	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Elementary Education Classes	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Educational Psychology	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Child Growth & Development Class	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Child Psychology	YES <input type="checkbox"/>	NO <input type="checkbox"/>

AVAILABILITY TO WORK

	MON	TUE	WED	THRU	FRI
6:45AM-9:00AM					
2:00PM-6:00PM					

I WOULD LIKE TO WORK APPROXIMATELY (PLEASE CIRCLE) 10 15 20 25 30 HOURS PER WEEK**PLEASE CHECK THE AREAS YOU WOULD BE WILLING TO WORK** Eldersburg area Westminster area Mount Airy area Gamber area Glyndon area**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. 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 release all parties from any liability for any damage that may result from furnishing same to ABC Care, Inc.

Signature

Date