



Return Completed Application to:

Comfort Care Homes of Kansas City, LLC
5250 W. 94th Terrace
Prairie Village, KS 66207
Phone: (913) 643-0111
Fax: (913) 273-1520
Email: info@comfortcarekc.com

APPLICATION FOR EMPLOYMENT

"It is the policy of ComfortCare Homes of Kansas City, LLC to recruit and employ the best qualified personnel for available positions, to provide equal opportunity for the advancement of employees, and to administer these activities in a manner which will not discriminate against any person because of race, creed, color, religion, age, sex, national origin, physical or mental handicap, economic status, or marital status."

PERSONAL

Date of application: _____ Desired wage / salary: _____ Full-time: _____ Part-Time: _____ Relief: _____

Name: _____ Social Security Number: _____
Last First Middle

Street Address: _____ Home Phone: _____

City, State, Zip _____ Alternate Phone: _____
Date available for work: _____

Have you ever worked under a different name? (for reference) Y___ N___ Name: _____
Have you ever worked for ComfortCare Homes before? Y___ N___ When: _____
Any days/hours you can not work? Y___ N___ When: _____
Are you legally eligible for employment in this country? Y___ N___
Are you able to perform the job described? Y___ N___
Are you able to meet the attendance requirements? Y___ N___
Are you able to work week-ends? Y___ N___

Have you had training in working with Memory Impaired people? Y___ N___ If yes, please explain.

Have you ever been convicted of a felony? Y___ N___ If yes, please explain.

Have you been convicted of an offense that involved abuse, neglect, or mistreating individuals? Y___ N___ If yes, please explain.

How did you learn about this opportunity? _____

Please mark the appropriate line: RN _____ LPN _____ CMA _____ CNA _____ Number: _____

EMPLOYMENT HISTORY

Starting with your present or last job, list your most recent past employment. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, handicap, or other protected status. Omissions will be considered a falsification of this employment application.

| | | | |
|--|-----------------------|----------|----------------------|
| Start Date | End Date | Employer | Immediate Supervisor |
| Start \$/hr | Final \$/hr | Address | Phone Number |
| Final Job Title | Reason for leaving | | |
| May we contact company? _____ Yes _____ No | If no, please explain | | |

| | | | |
|-------------------------|--------------------|-----------------------|----------------------|
| Start Date | End Date | Employer | Immediate Supervisor |
| Start \$/hr | Final \$/hr | Address | Phone Number |
| Final Job Title | Reason for leaving | | |
| May we contact company? | ___ Yes ___ No | If no, please explain | |

| | | | |
|-------------------------|--------------------|-----------------------|----------------------|
| Start Date | End Date | Employer | Immediate Supervisor |
| Start \$/hr | Final \$/hr | Address | Phone Number |
| Final Job Title | Reason for leaving | | |
| May we contact company? | ___ Yes ___ No | If no, please explain | |

Summarize any training, skills, licenses and/or special training that may qualify you as being able to perform job-related functions in the position for which you are applying: _____

EDUCATION

| Name and Location | # of Yrs | Graduate? | Course of study |
|--|----------|-----------|-----------------|
| Elementary School Location (City & State) | | | |
| High School Location (City & State) | | | |
| College Location (City & State) | | | |
| Other Location (City & State) | | | |

REFERENCES (Excluding former employers and relatives)

| Name | Phone Number | Years Known | City, State |
|------|--------------|-------------|-------------|
| | | | |
| | | | |
| | | | |

DECLARATION AND CERTIFICATION

As an applicant for employment, I certify that the information on this application is accurate and subject to verification by ComfortCare Homes. I consent to taking a pre-employment physical and such future physical examinations as may be required by ComfortCare Homes. I understand that any misrepresentation or omission of the facts or information made on this application are grounds for immediate discharge. I understand that this employment application and any other company documents are not contracts of employment, and that any individual who is hired may voluntarily leave employment upon proper notice, and may be terminated by this employer at any time and for any reason. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by a prospective or existing employee. Employment is subject to a reference check, passing the training program established, and compliance with the Immigration Law.

CONSENT TO RELEASE REFERENCES

I hereby authorize you to release any information regarding my present and/or past employment to Comfort Care Homes of Kansas City, LLC. I hereby release Comfort Care Homes of Kansas City, LLC and all persons, companies or corporations supplying such information from all liability or responsibility for any damage arising therefrom.

Signature of Applicant: _____ Date _____