



Empower Home Care LLC
 8601 N. Black Canyon Hwy Suite #105
 Phoenix, AZ 85021
 PH: (480)562-8877 FAX: 1(866)576-9928
 Email: eprhc2018@gmail.com

Employment Application

Applicant Information

Full Name: _____ Date of Birth: _____
LastFirstM.I.

Address: _____
Street AddressApartment/Unit #

CityStateZIP Code

Phone: _____ Email: _____

Date Available: _____ Social Security No.: _____ Driver's License/ID _____

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/Certifications/Documentation

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

CPR & First Aid _____ Fingerprint Card _____ Food Handler card _____ TB _____ Certified Caregiver _____



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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: _____



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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: _____