



APPLICATION FOR EMPLOYMENT

Date of Application: _____

Aacres WA, LLC is an Equal Opportunity Employer. Hiring decisions will be made without regard to race, color, creed, religion, national origin, age, gender, presence of any sensory, mental or physical disability, including HIV / AIDS conditions, use of a trained dog guide or service animal by a person with a disability, marital status, disabled status or veteran status, sexual orientation or any other reason prohibited by Federal, Washington, or local law; unless such decision/action is based upon a bona fide occupational qualification.

Position(s) applying for: Live-in Support Other _____

Willing to accept : (check all that apply) Full time Part Time Intermittent Temporary

Shift(s) available to work: Day Evening Night Weekends

Last Name	First	Middle	Phone
Street Address			Cell Phone
City / State / Zip			Email Address
Other Name(s) (i.e. married, maiden, alias)			

How did you hear about this position?

Friend Newspaper On Line Aacres WA, LLC Employee: _____

Are you eligible for employment in the United States? Yes No

Do you have a valid Washington Driver's License? Yes No

Are you over the age of 21? (if not, date: _____) Yes No

Have you ever applied for employment with Aacres WA, LLC? Yes No

Were you in the US armed forces? (is so, dates: _____) Yes No

Have you ever been convicted of any crime? * Yes No

*Washington State law prohibits Aacres WA, LLC from hiring or retaining employees who have been convicted of certain specified offenses. However, a conviction record will not necessarily be a bar to your employment except to the extent required by Washington State Laws. DSHS will consider your age at the time of the offense, the seriousness of the offense, the nature of the offense, your rehabilitation, and whether you are bondable, in determining whether you will be eligible for employment.

Education

High School: Name and City:	Diploma/GED: <input type="checkbox"/> Yes <input type="checkbox"/> No
Business / Trade / Technical: Name and City:	Major: _____ Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No
College: Name and City:	Major: _____ Degree: <input type="checkbox"/> Yes <input type="checkbox"/> No
Other Education / Certificates:	

Employment History / Volunteer Work – begin with most recent employer

Employer:		Direct Supervisor:	
Job Title:		Telephone:	
Duties:		Address:	
Start Date:		End Date:	
		Beginning Pay:	
		Ending Pay:	
Reason for leaving:			

Employer:		Direct Supervisor:	
Job Title:		Telephone:	
Duties:		Address:	
Start Date:		End Date:	
		Beginning Pay:	
		Ending Pay:	
Reason for leaving:			

Employer:		Direct Supervisor:	
Job Title:		Telephone:	
Duties:		Address:	
Start Date:		End Date:	
		Beginning Pay:	
		Ending Pay:	
Reason for leaving:			

Consent to Verification of Representations: I understand that the company may wish to verify representations contained in this application. I also understand that as directed by company policy and consistent with the job described, you may be requesting information from public and private sources about my: driving record, court record, education, credentials, credit and references. I hereby give my consent to the company and its agents to fully investigate the representations contained in this application as well as to investigate my personal history. I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer, reference or insurance company contacted by Aacres WA, LLC or its agents to furnish information as to my character, work habits, performance, and experience, along with reasons for termination of past employment. I release Aacres WA, LLC, its agents, and any person who provides information to Aacres WA, LLC, or its agents, from any claims that I may have for supplying information to Aacres WA, LLC or its agents. Representations: I represent and warrant that the information set forth in this application is complete, true, and correct in all respects. I understand that a material misstatement or omission of fact is grounds for the termination of my employment. "At-will" employment: I understand that employment with Aacres WA, LLC is "at-will". Aacres WA, LLC and its employees each retain the right to terminate the employment relationship at any time, with or without just cause. Nothing contained in the company's employment manuals or policy statements are intended to modify this principle. This policy may be altered or amended only by and with the written consent of the President of Aacres WA, LLC.

For this application to be complete, it must also include a completed background inquiry form with a written explanation of any crimes.

Signature of applicant

Date