

APPLICATION FOR EMPLOYMENT



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 240-779-5844
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 www.storishomecareservices.com*

PLEASE PROVIDE AS MUCH INFORMATION AS POSSIBLE DATE _____

Name _____

Last
First
Middle
Maiden

Present address _____

Number
Street
City
State
Zip

How long _____ Social Security No. _____ - _____ - _____

Telephone (____) _____ Email: _____

If under 18, please list age _____

Position applied for _____ Days/hours available to work
 and salary desired _____
 (Be specific)

No Pref _____ Thur _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights? _____

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

Have you ever applied for employment with us? _____ Yes _____ No

If yes, year: _____

Are you legally eligible for employment in the United States? _____ Yes _____ No
(Federal Law requires proof of identity and employment authorization for all new employees.)

When available for work? _____

How did you hear about At Home Health care Services? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional/Graduate School				

APPLICATION FOR EMPLOYMENT

Please list two references other than relatives.

Name _____

Name _____

Position _____

Position _____

Company _____

Company _____

Address _____

Address _____

Telephone () _____

Telephone () _____

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Signature of applicant _____ **Date:** _____

Stori's Home Care services LLCs 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 Victorious Healthcare Services depends solely on your qualifications.