

Connecticut Home Care Solutions, L.L.C.
Village Commons Unit 102, 137 Norwich Road
Plainfield, CT 06354
Employment Application

Phone: 860-564-9191 **FAX Application To:** 860-564-8484

Date: _____

PERSONAL INFORMATION		
First Name	Middle Name	Last Name
Other Names for Which You Have Been Known		Social Security Number
Current Street (street, city, state, zip code)		#of Years Date of Birth Optional:
Home Phone	Mobile Phone	Email Address
Are you a citizen on the United States? Yes or No If no, are you authorized to work in the U.S.? Yes or No		
How did you hear about us?		
Have you ever applied for a job with us? Yes or No		Have you ever been certified as a CNA or HHA? Yes or No

EDUCATION		
High School	Address	
From To	Did you graduate? Yes or No	Degree
College	Address	
From To	Did you graduate? Yes or No	Degree
Other	Address	
From To	Did you graduate? Yes or No	Degree

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

EMPLOYMENT HISTORY		
(Please be sure that ALL names of supervisors and phone numbers are correct)		
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 OR 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 OR 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 OR NO		

REFERENCES

Please list three personal references. **Please do not include friends or family members.**

Full Name	Relationship
Address	Phone
Full Name	Relationship
Address	Phone
Full Name	Relationship
Address	Phone

NOTES (Office use only)

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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
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EMPLOYMENT POSITIONS (Circle all that apply)

Temporary Work	Companion Work	Work with the elderly
Part-Time Work	Transportation Work	Chore Work
Full-Time Work	Weekdays Only	Alzheimer's Clients
Overnight Work	Weekends Only	Work with women
Homemaking Work	Any day	Work with men
PCA Work		

<u>Sunday</u>	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>

SUMMARY QUESTIONS

- Do you have any friends, relatives or acquaintances working for this company? YES OR NO
If yes, please list name and relationship: _____
- If hired, would you have transportation to and from work? YES OR NO
- Make and Year of Motor Vehicle owned _____
- Do you carry a minimum of at least \$20,000/\$40,000 on liability for auto insurance? YES OR NO
- How far are you willing to travel? _____
- Are you able to transport a client with a collapsible wheelchair or walker? YES OR NO
- Are you over the age of 21? YES OR NO
- If hired, are you willing to submit to and pass a controlled substance test? YES OR NO
- Do you currently have a full time job? YES OR NO
- What date can you begin work? _____
- Do you smoke? YES OR NO
- Do you have allergies? YES OR NO
- Can you work around dogs? YES OR NO Cats? YES OR NO
- Do you speak, write or understand any foreign languages? YES OR NO If yes, list which language(s) and how fluent you consider yourself to be. _____
- Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? (Please see job description page) YES OR NO
If no, please list your limitations or restrictions: _____

(Note: Company complies with the American Disabilities Act and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

Do you have any other experience, training, qualifications or skills which you feel should be brought to our attention in the case that they make you especially suited for working with us?

SELF ASSESSMENT SUMMARY*Please rate your level of experience (1=No experience 2=Some experience 3=Experienced 4=Very experienced)*

Personal Care

Bathing a client in tub 1 2 3 4
 Bathing a client in shower 1 2 3 4
 Sponge bathing client 1 2 3 4
 Washing a clients hair 1 2 3 4
 Applying lotion to client’s skin 1 2 3 4
 Brushing a client’s teeth 1 2 3 4
 Assisting with toileting 1 2 3 4
 Using a bed pan 1 2 3 4
 Changing clients briefs/diaper 1 2 3 4
 Assist client with dressing 1 2 3 4
 Dress client 1 2 3 4
 Assist client with other grooming 1 2 3 4
 Operate a hospital bed 1 2 3 4
 Transferring a client 1 2 3 4
 Positioning/Turning a client 1 2 3 4
 Using a gait belt 1 2 3 4
 Lifting a client 1 2 3 4

Ambulation & Transferring

Assist into/out of automobile 1 2 3 4
 Assisting client with walking 1 2 3 4
 Assisting client with cane 1 2 3 4
 Assisting client with walker 1 2 3 4
 Assisting client with wheel chair 1 2 3 4

Transportation

Driving client in their car 1 2 3 4
 Running Errands 1 2 3 4
 Escorting to appointments 1 2 3 4

Meals

Shopping for food 1 2 3 4
 Cooking 1 2 3 4
 Meal preparation 1 2 3 4
 Feeding client 1 2 3 4

Light Housekeeping

Changing bed linens 1 2 3 4
 Vacuuming 1 2 3 4
 Cleaning restrooms/kitchen 1 2 3 4
 Laundry 1 2 3 4

Specific Conditions

Dementia/Alzheimer’s 1 2 3 4
 Parkinson’s 1 2 3 4
 Hospice/End of Life Care 1 2 3 4
 Stroke 1 2 3 4
 Cancer/Chemotherapy 1 2 3 4
 Mental Illness 1 2 3 4
 Paralyzed 1 2 3 4
 Broken hip or replacement 1 2 3 4

Please take a moment to tell us why you are seeking this type of employment:

CRIMINAL RECORD HISTORY RELEASE FORM

Connecticut Home Care Solutions LLC
Village Commons Unit 102, 137 Norwich Road
Plainfield, Connecticut 06354
(860)564-9191
(860)564-8484 fax

The following individual has submitted an application for employment or volunteer work with this organization: (Please print and answer all questions.)

Last Name	First Name	Middle (Full)
Maiden, Alias or Former (provide names and dates changed)		
Date of Birth	Social Security No.	
Gender <input type="radio"/> Female <input type="radio"/> Male		

Please provide your home addresses for the past 7 years, starting with the most current first.

STREET ADDRESS	CITY	STATE	
COUNTY	FROM	TO	

STREET ADDRESS	CITY	STATE	
COUNTY	FROM	TO	

STREET ADDRESS	CITY	STATE	
COUNTY	FROM	TO	

STREET ADDRESS	CITY	STATE	
COUNTY	FROM	TO	

Have you ever been convicted of a crime (felony or misdemeanor)?

Yes

No

If yes, please explain: _____

Provide the state, county, and year of conviction: _____

I authorize Connecticut Home Care Solutions LLC, or its agent, to investigate my criminal background as it pertains to employment as a Connecticut Home Care Solutions employee, or any other employment or volunteer considerations. I release all persons, companies, or corporations furnishing information as part of this background investigation from liability or responsibility. I certify that all information provided is true and complete to the best of my knowledge. I understand that omitting or falsifying information could result in rejection of application or dismissal if hired. The expiration of this authorization shall be for a period of one year from date of signature.

Signature

Date

FOR OFFICIAL USE ONLY

Job Description

Below is a brief description of each job category for the home bound elderly and disabled. These descriptions merely serve as a guide.

~Companion Services~

- ~Socialization
- ~Light housekeeping
- ~Transportation/Escort to med appointments.
- ~Recreational activities such as walking, playing cards, puzzles, board games, arts & crafts.
- ~Supervision
- ~Light meal prep
- ~Verbal med prompting

If you are scheduled for a companion service where your duty is to just provide socialization and supervision, it is still necessary that make it known you were there. It is important that you tidy up the house, be it wiping down the counters, doing the dishes or straightening up the living room.

~Homemaking Services~

Domestic cleaning includes but is not limited to:

- ~Vacuuming
- ~Washing floors
- ~Laundry
- ~Assist with monthly bill paying
- ~Trash removal
- ~Meal preparation (planning, shopping, preparing and clean-up)
- ~Dusting
- ~Dishes
- ~Change bed linens
- ~Cleaning kitchen
- ~Sweeping/dry mop
- ~Cleaning bathrooms
- ~Shopping/Errands

~Chore Services~

*Heavy duty tasks that must be approved in advance by the office in order to receive the higher rate of pay.

- ~Cleaning ovens
- ~Washing walls
- ~Cleaning and organizing cupboards, drawers and closets
- ~Cleaning refrigerators
- ~Washing inside windows
- ~Defrost freezer
- ~Packing and unpacking

Personal Care Assistant (CNA Certified)

Caregivers will assist with the following ADL's (Activities of Daily Living)

Bathing, Dressing, Hair & Skin care, Oral Hygiene, Toileting, Feeding, Exercising

Also includes assistance with: Changing bed linens, clean commodes, Housekeeping, Laundry, Light meal preparation & cleanup, Bill paying, Recreational activities, Transportation & escort to appointments and Verbal med prompting.

~Transportations Services~

This includes transportation or accompanying a client as an escort to local and long distance medical appointments.

~Alzheimer's and Respite Care~

These services provide basic supervision for persons who have symptoms of dementia, diagnosed with Alzheimer's disease or are unable to be left unattended. Generally, these clients reside with their families or live-in caregivers. These services provide personal time for the client's family or caregivers allowing them to attend to their daily personal responsibilities, appointments and recreational activities. The dynamics and task requirements of each case are different. You will receive detailed instructions upon assignment to each case. If you decide to be a provider for such cases you will be responsible for attending our training classes and in-services.