

Home Care for Christian Scientists, Inc.

HOME AIDE APPLICATION FOR EMPLOYMENT

_____ LAST NAME	_____ FIRST NAME	_____ MIDDLE INT	_____ TODAY'S DATE
_____ STREET AND NUMBER		_____ SOCIAL SECURITY NUMBER	
_____ CITY, STATE, ZIP CODE		_____ ARE YOU OVER 18?	
_____ HOME PHONE	_____ BUSINESS PHONE	_____ MAY WE CALL YOU AT WORK?	

AVAILABILITY DATE

AVAILABILITY TIMES

DO YOU HAVE A CAR?_____ AUTO INSURANCE?_____ PUBLIC TRANSPORTATION?_____

CHRISTIAN SCIENCE DATA

MEMBER OF THE MOTHER CHURCH?_____ BRANCH ATTENDED_____

MEMBER SINCE_____ MEMBER SINCE_____

Do you study the Lesson Sermon regularly?_____

Are you free from the use of liquor, tobacco, drugs, medication?_____

Have you had Christian Science class instruction?_____ if so, when?_____

Have you had any Christian Science nurses training?_____ if so, describe where, when and where

Have you ever served as a Christian Science Home Aide before?_____ if so, describe when and where

REFERENCES

Three Christian Scientists (not family) who can comment on your character and your daily practice of Christian Science. One reference should be a Practitioner or Teacher

_____ Name	_____ Name	_____ Name
_____ Address	_____ Address	_____ Address
_____ Day time phone	_____ Day time phone	_____ Day time phone

MOST RECENT EMPLOYMENT

(Please attach supplementary sheet with similar information for additional employment and volunteer work)

_____ FROM	_____ TO	_____ EMPLOYER NAME AND ADDRESS
_____ POSITION	_____ SUPERVISOR	_____ SUPERVISOR'S PHONE
_____ DESCRIBE YOUR RESPONSIBILITIES		_____ REASON FOR LEAVING
_____		_____
_____		_____
_____		_____

EDUCATION

PLEASE FILL IN THE HIGHER LEVEL YOU HAVE COMPLETED

____ High School/GED ____ Business/Technical ____ College ____ Post Graduate

_____ NAME OF THE SCHOOL OR INSTITUTION	_____ MAJOR FIELD OF STUDY
_____ APPRENTICESHIPS, INTERNSHIPS, ETC.	_____ DEGREE, DIPLOMA, LICENSE

How did you hear about Home Care for Christian Scientists, Inc.? _____

Please read the Home Aide Job description and Statement of Understanding. After reading these, please explain what you feel you can bring to this work. _____

Please indicated if there is anything in either the Job Description or Statement of Understanding that you feel uncomfortable with, or that you would like to have explained further _____

Is there anything that you would like to add? _____

I affirm that all statements made on this application are true.

_____ APPLICANT'S SIGNATURE	_____ DATE
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"Bear ye one another's burden, and so fulfill the law of Christ." GALATIANS