



PERSONAL INFORMATION

Full first name, middle initial, last name:

Address:

Full Street Address with Apt # if applicable

City

State

Zip

Home Phone: _____ Email Address: _____

Cell Phone:

Can you legally work in the United States? ☐ Yes ☐ No

*If it is NOT legal for you to work in the U.S.,
we cannot process your application for
employment.*

How did you hear about this job? _____

Position you're applying for: _____ When can you start? _____

EMPLOYMENT HISTORY

Are you currently employed? ☐ Yes ☐ No If yes, may we contact your employer? ☐ Yes ☐ No

Please list your current and prior work experience:

Please list your current and prior work experience:				
DATES (MONTH/YEAR)	COMPANY NAME AND LOCATION	PHONE	POSITION/SALARY	REASON FOR LEAVING

Please list any other related work experience/training/volunteer experience:

Do you have a valid driver's license? ☐ Yes ☐ No

Do you have a vehicle you can drive for work? ☐ Yes ☐ No

Which city or cities would you prefer to work in? Please list in order of most preferred to least preferred:

Do you have fluency and/or basic conversational skills in any language(s) other than English?

EDUCATION

SCHOOL NAME	LOCATION	GRADUATED?	AREA OF STUDY

REFERENCES: List three people **not** related to you whom you have known at least one year.

NAME	CITY	PHONE	RELATIONSHIP TO YOU

IN CASE OF EMERGENCY, NOTIFY: _____ PHONE: _____

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CONSIDERATION FOR DISMISSAL.

SIGNATURE

DATE

Email this completed application to **HOME@seniorcommunity.org** or mail a printed copy to:

Senior Community Services
HOME Program
10201 Wayzata Blvd Suite 335
Minnetonka, MN 55305

Phone: 952-746-4046