

HUNSAKER HOME ADULT FOSTER CARE
 580 HUNSAKER LANE,
 EUGENE, OREGON, 97404
 (541) 505-7091



Hunsaker Home
Adult Foster Care

— EMPLOYMENT APPLICATION —

Last Name		First		Middle		Date of Birth		
Street Address		Apartment / Unit #						
City			State			Zip		
Phone			E-mail Address					
Date Available			Social Security Number		Desired Salary			
Position Applied for			DL or State ID#			State Issued		
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:				
Have you been found to have committed abuse?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you lived or traveled outside of Oregon more than 60 consecutive days in the past 5 years?			YES <input type="checkbox"/>	NO <input type="checkbox"/>

— EDUCATION —

High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

— PREVIOUS EMPLOYMENT —

Company			Address				
Phone			Supervisor			Job Title	
From	To	May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Reason for Leaving							

— PREVIOUS EMPLOYMENT CONTINUED —

Company			Address		
Phone		Supervisor		Job Title	
From		To		May we contact your previous supervisor for a reference?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Reason for Leaving					
Company			Address		
Phone		Supervisor		Job Title	
From		To		May we contact your previous supervisor for a reference?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Reason for Leaving					

— REFERENCES —

Please list three professional references. Do not list supervisors from previous employment.

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

— MILITARY SERVICE —

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

— DISCLAIMER AND SIGNATURE —

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or handicap. We are an equal opportunity employer.

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