



HELPING HANDS CHORE SERVICE

SERVING WINSTED, COLEBROOK, NEW HARTFORD and, BARKHAMSTED

APPLICATION FOR EMPLOYMENT

Helping Hands Chore Service, Inc. is an Equal Opportunity Employer and considers applicants for all positions without regard to race, color, sex, age, disability or other legally protected status.

Return To: Helping Hands Chore Service, Inc.
PO Box 888
Winsted, CT 06098

INSTRUCTIONS FOR COMPLETING APPLICATION

This application constitutes a part of the examination process. It must be completed in full even if resumes or other supporting materials are attached. Please answer all questions fully and accurately. Applications may be rejected or receive less consideration because answers are incomplete, vague or elusive. Your statements may be brief but do not omit important information which may have relevance to the position.

POSITION APPLYING FOR: _____ Date: _____

Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (Town/City) (State) (Zip)

Home Phone: _____ Work Phone: _____

Are you either a U.S. Citizen or an alien authorized to work in the United States? YES _____ NO _____
(Must provide documentation if hired)

Are you 18 years of age or older? YES _____ NO _____

Have you ever filed an application with us before? YES _____ NO _____ If YES, when? _____

EDUCATION

LEVEL	NAME & LOCATION OF SCHOOL	COURSE OF STUDY	CIRCLE LAST YEAR COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
High School			1 2 3 4		
College			1 2 3 4		
Other			1 2 3 4		

Name of Employer: _____ Phone: _____

Address: _____

Name & Title of Supervisor: _____

Your Job Title: _____ Employed: Full Time _____ Part Time _____

Employed From: _____ / _____ To _____ / _____ Salary: _____ / _____
Month Year Month Year From To

Duties & Responsibilities: _____

Reason for Leaving: _____

Name of Employer: _____ Phone: _____

Address: _____

Name & Title of Supervisor: _____

Your Job Title: _____ Employed: Full Time _____ Part Time _____

Employed From: _____ / _____ To _____ / _____ Salary: _____ / _____
Month Year Month Year From To

Duties & Responsibilities: _____

Reason for Leaving: _____

Name of Employer: _____ Phone: _____

Address: _____

Name & Title of Supervisor: _____

Your Job Title: _____ Employed: Full Time _____ Part Time _____

Employed From: _____ / _____ To _____ / _____ Salary: _____ / _____
Month Year Month Year From To

Duties & Responsibilities: _____

Reason for Leaving: _____

Have you ever been fired or asked to resign from a job? YES _____ NO _____. If YES, please explain:

May we contact your present employer? YES _____ NO _____

SPECIALIZED TRAINING OR SKILLS

List any special qualifications or certifications/licenses which you feel may especially qualify you for the position for which you are applying (include seminars, areas of research, special awards and professional memberships):

Please list all computer software and other office equipment that you use: _____

Use the space below to provide additional information necessary to describe your full qualifications: _____

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? YES _____ NO _____ If YES, what branch? _____

Dates of Duty: From _____ to _____ Rank at Discharge: _____
(Month/Day/Year) (Month/Day/Year)

List duties in the service, including special training: _____

REFERENCES

List below 3 individuals (not relatives) who know your character, ability and experience:

NAME	ADDRESS	TELEPHONE	RELATIONSHIP	YEARS ACQUAINTED

CRIMINAL HISTORY REQUEST

Have you ever been convicted of a felony or are there current criminal charges pending against you? (Before answering, please read the bulleted section below.) YES _____ NO _____

If YES, please provide explanation:

- This information will be available only to the Personnel Department and to those individuals who are involved in interviewing the candidate.
- You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to section 46b-146, 54-76o or 54.142, which are records pertaining to a finding of youthful delinquency or that a child was a member of a family in need of services, adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which you have been found not guilty or a conviction for which you received an absolute pardon.
- If your only criminal record consists of items that have been erased under the statutes listed above, then you may state on this form that you have not been arrested.

CERTIFICATION: By signing below I certify that the information I have provided on this application is correct, complete and truthful. I realize that falsification of any of this information may be grounds for rejection of this application, or termination of employment, depending upon when the falsification is discovered.

I also give consent for you to check with previous employers and the personal references and release Helping Hands Chore Service, Inc., previous employers and personal references from any liability arising from disclosure of information concerning my past employment or personal history.

Drug Testing: I understand that Helping Hands Chore Service, Inc. may at some time request job applicants to successfully pass a urinalysis drug test.

Criminal Records Check: I understand that Helping Hands Chore Service, Inc. requires all job applicants who are given a conditional job offer to successfully pass a criminal records check.

I further understand the acceptance of this form does not constitute an employment agreement and that the Hiring Personnel of the Helping Hands Chore Service, Inc. is authorized to extend an offer of employment.

SIGNATURE: _____

DATE: _____



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VOLUNTARY AFFIRMATIVE ACTION QUESTIONNAIRE

As an Affirmative Action Employer Helping Hands Chore Service, Inc. has a responsibility to comply with Federal and State-mandated regulations. We ask your cooperation in completing the following questionnaire to help us meet government record keeping and reporting requirements. Data will be kept in an affirmative action file separate from your application for employment. YOUR COOPERATION IN COMPLETING THIS PORTION OF THE EMPLOYMENT APPLICATION IS VOLUNTARY. Your decision not to include data will not affect any employment decisions.

Position Applied for: _____

Sex: Male _____ Female _____

Race/Ethnic Group:

White _____ Black _____ Hispanic _____

American Indian/Alaskan Native _____ Asian/Pacific Islander _____

How did you hear about this job opening?

Register Citizen _____

Current employee _____

Hartford Courant _____

Professional publication _____

Waterbury Republican _____

Professional organization _____

CT Employment Service _____

City Hall Posting _____

Internet _____

Walk In _____

NAME: _____

DATE: _____