

Date of application: _____

Adult Care of Chester County Application for Employment

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, handicap, veteran status, or any condition prescribed by state or local law.

Name: _____ Social Security #: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____

Position Applied for: _____ How did you hear about job? _____

Do you know anyone who works or worked for ACCC? If so, who? _____

Education:

	Name and location of school	Years attended	Did you graduate	Subjects Studied
Grammar				
Middle				
High School				
College				
Trade or Business				

Previous Experience/former employers: List below your last five employers, starting with the last one first

Date Month/Year	Name and address of employer	Salary	Position/ Title	Reason for Leaving
From: To:				
From: To:				
From: To:				
From: To:				
From: To:				

Have you been convicted of any crimes in the past, excluding misdemeanors and summary offenses, which have not been annulled, expunged, or sealed by a court? Yes No If yes, describe in full.

Listing a conviction will not automatically disqualify an applicant from employment.

What can you bring to this position that would make a difference in the lives of our participants?

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References: Give below the names of two persons not related to you, whom have known you at least two years.

Name	Address (street, city, state, zip)	Phone	Relationship	Years known

Applicant’s signature – Please read and understand this statement before signing your application.

The information I have provided in this Application for Employment is true, correct and complete. False, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize Adult Care of Chester County, Inc. to contact and obtain information about me from previous employers, educational institutions and “references” I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations, or organizations who provide information for this purpose.

I have lived in Pennsylvania continuously for the past two years YES NO

This application is not an employment agreement. If I accept an offer of employment I understand I may resign at any time, and the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than the President/CEO of Adult Care of Chester County, Inc., has authority to enter into any employment agreement.

I fully understand and accept all terms and conditions of the above statement.

Signature: _____ Date: _____

To be completed by Office personnel:

First interview by: _____ Date: _____

Legend: 1 excellent 2 above average 3 average 4 below average 5 poor

	1	2	3	4	5		Comments:
Ability							
Attentiveness							
Communication skills							
Enthusiasm							
Neatness							

Second interview by: _____ Date: _____

Comments: _____

Hired: Yes No Position: _____ Status: FT PT to start then FT PT PRN

Wage: _____ Note: _____ Start date: _____ Revised 4/2015

Important information for Applicants for Employment

An equal opportunity employer, Adult Care of Chester County considers all qualified applicants without regard to race, color, creed, religion, sex, national origin, sexual orientation, age, marital status, veteran status, disability or any other classes protected by law.

Adult Care of Chester County has been providing adult day services longer than any other provider in Chester County and employs people who have a desire to work with older adults affected by chronic or progressive illness or people with intellectual or developmental disabilities that need assistance with activities of daily living. Adult Care of Chester County employees are committed to providing high quality care and services with a genuine interest in the people they serve.

Benefit packages vary based on full-time and part-time status but all include Basic Earned Leave (paid time off) accrued based on the hours worked.

The process for application is as follows:

- Submit application/resume for consideration (fax 610.363.8507 or email: dshull@acofcc.org)
- Interview - 1st
- Selected applicants will be invited to spend a 5 hour day on-site interacting with participants and staff members. This provides a chance for the applicant to learn more about the job duties and provides an opportunity for the leadership of Adult Care of Chester County to observe the applicant's interactions with participants and staff.
- Prior to spending the time with participants, the applicant must provide a completed ACCC medical form and either a recent PA State Police Clearance or date of birth for ACCC to run the PA State Police clearance. If the applicant has not resided in Pennsylvania for the last two years, an FBI check will be required.
- Interview - 2nd interview is held at the end of the visit.
- If the person is selected for employment, contact will be made with the selected applicant and an offer of employment will be made. A letter will be sent as follow-up and include forms that need to be completed. On the first day of employment a completed W-4 form will be turned in, an I-9 form with section 1 completed will be turned in and two acceptable forms of ID will be presented to the employer representative. To verify the validity of the Form I-9 documentation Adult Care of Chester County uses E-Verify. Information about E-Verify can be found on the Adult Care of Chester County website at www.acofcc.org on the Employment Opportunities page.

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