## Positive Approach Inc.

Phone: 720-685-0001

Completed applications can be faxed, emailed, or mailed:

Fax: 720-685-0500

Email: <u>main@positiveapproachinc.com</u> 115 Strong Street • Brighton, CO 80601

## EMPLOYMENT/ INDEPENDENT CONTRACTOR APPLICATION

## **Welcome to Positive Approach**

We would like to thank you for your interest in our agency. Our agency provides residential services to individuals with developmental disabilities. Positive Approach is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

PERSONAL					
Last Name	First Init		Initial	Social Security #	
Other Name(s) Used			Home Tele	ephone #	
Address			Business o	or Message #	
Position Applied For	Referred By			Salary Des	sired
Have you ever interviewed with Positive Approach before? ☐ Yes☐ No		If yes, list date(s), job title(s) & location(s)			
Have you ever been employed or contracted with Positive Approach before? ☐ Yes☐ No		If yes, list date(s), job title(s) & location(s)			
Do you have any relatives employed or contracting with Positive Approach? ☐ Yes☐ No		If yes, list date(s), job title(s) & location(s)			
Are you at least 18 years old?  ☐ Yes☐ No		If under 18, do you have a work permit?			
EDUCATION					
Circle Highest Grade Completed: High School College, Tra Graduate Str		ade or Business	9 1	0 11 2 3	12 4
School	Address	Ma	ajor Studio	es	Degree, Diploma, License or Certificate
High School					
College/University					
Vocational, Business, Other					
List Any Professional Designations					
Other Special Knowledge, Skills, Q	ualifications or C	Certifications			

Briefly describe why you want to work with an individual with developmental disabilities.			
THE SECTION BELOW IS FOR IT Describe your lifestyle: Enjoy outdoor activities-Describe Enjoy staying at home-Describe	HOST HOME PROVIDER/FAM	ILY CAREGIVERS	
Briefly describe your home:			
☐ Single Family	☐ Wheelchair Accessible	□ Dogs	
□ Town Home	□ # of Bedrooms	□ Cats	
☐ Apartment	□ # of Bathrooms		
☐ Mobile Home	□ Walk-In Shower		
☐ Ranch Style	□ Bathtub		
□ Two-Story			
Describe what a typical Breakfast,	Lunch and Dinner Menu that you	cook and serve.	
Personal or Professional References: (Do Not Use Family Members)			
Name:			
Address:			
Phone Number:			
Years Known:			
How Reference Knows Individual:			
Comments:			

Name:	
Address:	
Phone Number:	
Years Known:	
How Reference Knows Individual:	
Comments:	
т	
Name:	
Address:	
Phone Number:	
Years Known:	
How Reference Knows Individual:	
Comments:	

CONTINUED - Personal or Professional References: (Do Not Use Family Members)

## EMPLOYMENT HISTORY

List all employments for the past 10 years, starting with the most recent position. All information **must** be completed. You may attach a resume, but not in place of completing the required information.

required inform	ation.		1	
Employed From	Employer Name	Supervisor Name Starting St		
Employed Until	Employer Address	Supervisor Phone #	Ending Salary	
Job Title		Reason for Leaving		
Duties & Responsib	ilities			
Employed From	Employer Name	Supervisor Name	Starting Salary	
Employed Until	Employer Address	Supervisor Phone #	Ending Salary	
Job Title		Reason for Leaving		
Duties & Responsib	ilities			
Employed From	Employer Name	Supervisor Name	Starting Salary	
Employed Until	Employer Address	Supervisor Phone #	Ending Salary	
Job Title		Reason for Leaving		
Duties & Responsib	ilities			
Employed From	Employer Name	Supervisor Name	Starting Salary	
Employed Until	Employer Address	Supervisor Phone #	Ending Salary	
Job Title		Reason for Leaving		
Duties & Responsib	ilities	1		

GENI	ERAL	
Yes	No	
		May we contact your current employer for references?
		If hired, will you be able to work overtime?
		Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation?
		Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or seals by court? (A ?yes? response does not automatically disqualify your application.)
CERT	IFICAT	ΓΙΟΝ & AUTHORIZATION
	Positive false or	We information is true and correct. I understand that, in the event of my employment or contract with Approach, I shall be subject to dismissal if any information that I have given in this application is misleading or if I have failed to give any information herein requested, regardless of the time after discovery.
	reference employer Positive informati	ze Positive Approach to inquire into my educational, professional and past employment history es as needed to research my qualifications for this position. I hereby give my consent to any former r to provide employment-related information about me to Positive Approach and will hold the Approach and my former employer harmless from any claim made on the basis that such ion about me was provided or that any employment decision was made on the basis of such ion. I further authorize the Positive Approach to obtain any credit and consumer check.
	subseque contract of could be contract	and that nothing in this employment or contractor application, the granting of an interview or my ent employment or contract with the Positive Approach is intended to create an employment or independent contract between myself and the Company under which my employment or contract terminated only for cause. On the contrary I understand and agree that, if hired, my employment or will be terminable at will and may be terminated by me or Positive Approach at any time and for on. I understand that no person has any authority to enter into any agreement contrary to the ge.
	right to	yed or contracted, I will be required to provide original documents which verify my identity and work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The at(s) provided will be used for completion of Form I-9.
	I hereby	acknowledge that I have read and agree to the above statements.

Date

Form 7-5 6

Signature of Perspective Employee/Contractor