

Communicare Incorporated

Assisted Living Facilities
P.O. Box 18020
Clearwater, Florida 33762

Application For Employment

To Applicant : We appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications and may assist us with evaluating possible future promotional opportunities. Communicare, Inc. is an equal opportunity employer.

General Information

Position Applied For: _____ Date: _____

Applicants Name: _____ Phone #: (____) _____

Present Address: _____
Street City State Zip

Previous County and State if less than one (1) year at current address. _____

Are you 18 years of age or older? Yes or No

Are you legally eligible for employment in the USA? Yes or No. If no why? _____

Do you have a valid Florida Drivers License? Yes or No License #: _____

Have you had a valid Florida Drivers License for a least three (3) years? _____

If no, what state did you have a license in before Florida? _____

Are you seeking full or part-time work? _____ Pay expected? \$ _____ Per Hour

What shift are you seeking work? (1st, 2nd, 3rd, Weekends or Any) _____

Has our company ever employed you previously? Yes or No

If yes, when, and in what location? _____

When will you be available to begin work? _____

Why did you choose to apply with our company? _____

Have you ever been convicted of a crime other than a minor traffic offense? Yes or No

If so, state the nature of the offense and the date and place the offense took place. _____

Skills

List your specific job skills or work experience that you feel qualifies you for this job. _____

What are your strongest skills? _____

What are your weakest skills? _____

Employee Referral Information

Communicare Incorporated maintains an employee referral program. Were you referred to the company for employment from an existing employee? **Yes or No.**

If yes. Who? _____

