

**ENCHANTED HILLS
HOME HEALTHCARE AGENCY, INC.**

7555 Enchanted Hills Blvd., Suite 200

Rio Rancho, NM 87144

(505) 867-0621

(505) 867-0623 (Fax)

Name: _____ Date: _____

Address: _____ Phone No.: _____

Position Applying for: _____

1.) Are you able to work Full-time? _____ Part-time? _____

2.) How soon can you start work? _____

3.) In the last 7 years, have you been convicted of a crime? _____

If yes, please explain. (All applicants must be able to pass a criminal background check prior to employment) _____

EDUCATION:

School Name	Address	Course of Study	Years completed	Diploma/ Degree/GED

List any other skills that you have (typing, CPR, First Aide, etc.) _____

REFERENCES: List 2 personal references who can be contacted about your character.

1) Name: _____ Relationship: _____

Years Known: _____ Phone No.: _____

Address: _____

2) Name: _____ Relationship: _____

Years Known: _____ Phone No.: _____

Address: _____

EMPLOYMENT HISTORY:

List your last 3 employers.

1) Employer: _____
Address: _____
Phone No.: _____ Supervisor: _____
Position held: _____
Reason for leaving: _____

Dates employed: From _____ To _____ Salary _____
Describe your duties: _____

2) Employer: _____
Address: _____
Phone No.: _____ Supervisor: _____
Position held: _____
Reason for leaving: _____

Dates employed: From _____ To _____ Salary _____
Describe your duties: _____

3) Employer: _____
Address: _____
Phone No.: _____ Supervisor: _____
Position held: _____
Reason for leaving: _____

Dates employed: From _____ To _____ Salary _____
Describe your duties: _____

May we contact your previous employers? Yes _____ No _____

I certify that all the information given is true and correct to the best of my knowledge. I understand that statements contained in this application will be verified. In the event that any of the information is false or misleading, I will not be eligible for hire.

Applicants Signature: _____ Date: _____