

Thank you for choosing to apply with Acacia Care! We offer a challenging and rewarding job opportunity with competitive wages. Before completing the application, please read the following information about our company.

Acacia Care is contracted with the Arizona Department of Economic Security – Division of Developmental Disabilities to provide HCBS (Home and Community Based Services) to people with developmental disabilities. Our contract requires that employees working in direct care positions:

- Be at least 18 years of age with a valid AZ Drivers License or Identification Card
- Provide 3 written references
- Have at least 3 months caregiving experience
- High School Diploma or GED
- Have a clear criminal record (employees will be required to be fingerprinted and must clear an F.B.I.
 investigation pursuant to receiving a Class One Fingerprint Clearance Card from the Department of
 Public Safety).
- Email Capability
- Have a smartphone for employer contact while working in the community as well as logging in/out for hours worked in the community.
- Reliable Transportation

Some positions require that staff be physically able to assist clients in and out of beds, wheelchairs, and vehicles. Employees are trained in proper lifting techniques and are required to be able to lift and maneuver at least 50 pounds.

Acacia Care promotes and maintains safe working environments. We train employees in safety techniques and procedures and conduct regular safety inspections. We also comply with the Drug-Free Workplace Act of 1988 to ensure the safety and well being of our clients and staff.

Some of the clients that we serve may carry a Hepatitis Virus. All applicants must be aware of the possibilities of contracting this potentially serious disease. The risk of contracting Hepatitis is quite low; unfortunately there can be no guarantee that you will not be exposed to the virus. Vaccinations are available. Please feel free to discuss the risk with your health care provider.

the statements presented. Please feel free to	ask questions of your interviewer.	nderstood
Applicant's Signature	Date	
Certification and Authorization (Please re	ad and sign after completing application)	
"I contifue that the statements contained in thi	application are two and complete to the best of my linearised	. T

"I certify that the statements contained in this application are true and complete to the best of my knowledge. I understand that, if I am employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein. I authorize the references and employers listed in this application to give Acacia Care any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release Acacia Care from all liability for any damage that may result from using that information.

I also understand and agree that no representative of Acacia Care has any authority to enter into any agreement for
employment for any specific period of time, or to make any agreement contrary to the foregoing, unless it is in writing
and signed by an authorized company representative"

Applicants Signature	Applicants Name	Date