

CONSUMER DIRECTED SERVICES
ATTENDANT APPLICATION

Personal Data

Date: _____

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone (Home): _____ (Cell): _____ Is this your OWN phone? Yes No
Are you 18 or older? Yes No Male Female
Do you have reliable transportation? : _____
Are you available to work over vacations? Yes No
Based on the job description, are you able to perform the essential functions of this job? _____

Have you ever had contact with us before? _____
How did you learn about this position? _____
Have you ever worked with persons with physical disabilities? ____ If "yes", explain types and describe duties:

Are you related to the Consumer that you are applying to work for? yes no
If yes, what is your relationship? _____

Preferences and Availability

Do you prefer working with males, females, or either? _____
Do you prefer a full or part-time position? _____

List the day/hours of week available: Shift One: Shift Two:

Sunday:	_____	_____
Monday:	_____	_____
Tuesday:	_____	_____
Wednesday:	_____	_____
Thursday:	_____	_____
Friday:	_____	_____
Saturday:	_____	_____

Employment History (most recent first)

Company Name: _____
Address: _____
Dates Employed: _____ Positions Held: _____
Duties: _____ Reason for Leaving: _____
Are you eligible for rehire? _____ If no, explain: _____

Continued on page 2

Company Name: _____
Address: _____
Dates Employed: _____ Positions Held: _____
Duties: _____ Reason for Leaving: _____
Are you eligible for rehire? _____ If no, explain: _____
Do we have permission to contact your past employer?: _____

References

Please list three personal references not related to you.

Name: _____ Relationship: _____
Address: _____ Phone: _____

Name: _____ Relationship: _____
Address: _____ Phone: _____

Name: _____ Relationship: _____
Address: _____ Phone: _____

Disclosure and Consent

All prospective employees are to disclose all criminal convictions, findings of guilt, pleas of guilty, and pleas of nolo contendere, except minor traffic violations. As a prospective employee do you have any criminal convictions, findings of guilt, pleas of guilty, and/or pleas of nolo contendere (except minor traffic violations)? Yes No

If yes please explain:

I _____ consent to a pre-employment criminal record check and a closed record check pursuant to Section 610.210, RSMo.

I certify that answers given herein are true and complete to the best of my knowledge.

Signature of Applicant

Date

Disability Resource Association (DRA) accepts job applicants for personal care attendant positions as a service to consumers who may need PCAs. Consumers establish working relationships with PCAs which may be employment or independent contractor relationships. Disability Resource Association is NOT either an employer or independent contractor for or with consumers or PCAs. PCAs are responsible for negotiating working relationships with individual consumers, including discussions of responsibility for payment of taxes, etc.