

APPLICATION FOR EMPLOYMENT

 Q Lombard: Q Skokie: Q Elgin: Q Justice: Q Devon: Q Albany Park: Q Melrose Park: Q Bolingbrook: Q Mt Prospect: Q Hanover Park: Q Crystal Lake: 	1210 South Highland Ave, I 5200 Main Street Sko 1837 Larkin Ave, El 8104 S. Roberts Rd. Ju 2900 W. Devon Ave. Ch 4310 W. Lawrence Ave. C 2225 W. North Ave. Melro 489 W. Boughton Road Bol 1717 W. Golf Road Mount I 1830 W. Army Trail Rd. Han 1024 S McHenry Ave. Cry	gin, IL 60077 gin, IL 60123 stice, IL 60458 nicago, IL 60659 Chicago, IL 60630 se Park, IL 60160 ingbrook, IL 60440 Prospect, IL 60056 over Park, IL 60133	Tel: (630) 953-1950 Tel: (847) 329-8500 Tel: (847) 608-9352 Tel: (708) 594-2273 Tel: (773) 274-1380 Tel: (773) 685-2273 Tel: (708) 344-2273 Tel: (630) 679-1580 Tel: (847) 427-2273 Tel: (630) 372-2475 Tel: (815) 455-2273	Fax: (630) Fax: (847) Fax: (847) Fax: (708) Fax: (773) Fax: (708) Fax: (630) Fax: (630) Fax: (630) Fax: (630)	329-8501 608-9353 594-2217 274-1381 685-2272 344-2277 679-1581 640-9204 372-2488
Equal Employ	ment Opportunity				(Let)
positions without reg veteran status, or the ence and the requirer	-	er, national origin, age, ser disability that is not job-r	rual orientation, gender iden	tity and/or expres	sion, martial or of ability, experi-
Please print an	d answer all questions	thoroughly			
Application Date	://	position you are seek	ing:		
How did you Hea	ar about this Position?				
Personal Info	ormation [-	Applicant's Personal Informa	tion Changed		
Full Legal Name	:				
8	Last		First	Mide	dle
Address:					
House Nu	ımber Street	Unit	City	State	Zip
Social Security #	:	Email:			
•					
Phone (Home): (· · · · · · · · · · · · · · · · · · ·	Phone (Cell) :	(Gender:	
Date of Birth:	//	Language(s):			
_					
Employment	t Desired				
		Date A	Available for work:	//	
Type of Employ	ment:	□Part Time	☐ Temporary		
♦ Are you able	to be legally employed in	United States?		☐ Yes	□ No
♦ Have you previously been employed by Sahara Asian Elderly			Care?	☐ Yes	☐ No
If yes, please	provide the date of you er	nployment:/	and posit	ion:	
•	a valid Drivers License?			☐ Yes	☐ No
· ·	ou have reliable means of t	?	☐ Yes	□ No	
♦ If hired, wou	ld there be restriction on tra	avel if required?		☐ Yes	□ No

List all present and past emp	loyers, starting with you most r	ecent employer.			
Employer:	Telephone:	Date Employ	Date Employed		
		From	То		
Address:	Job Title:	Immediate S	Immediate Supervisor:		
Reason(s) for Leaving:	Describe Duties and Respon	nsibilities:			
Employer:	Telephone:	Date Employ	vod		
Employer.	Telephone.	From	To		
A		Pioni	10		
Address:	Job Title:	Immediate S	Immediate Supervisor:		
Reason(s) for Leaving:	Describe Duties and Respon	nsibilities:			
Employer:	Telephone:	Date Employ	Date Employed		
		From	То		
Address:	Job Title:	Immediate S	Immediate Supervisor:		
Reason(s) for Leaving:	Leaving: Describe Duties and Responsibilities:				

Education & Training

	Name / Location	Course	Year Completed	Type of Degree			
High School							
Undergraduate College							
Graduate College							
Other							
List any certifications, trainings, or other education not listed above that may help you qualify for this position:							
References	2/2000						
List below three persons not related to you who have knowledge of your work performance within the last 5 years Name: Occupation:							
Company:	Years Known: _	Phone #					
	Years Known: _						
	Years Known: _						
1 1001 C55.							

Agreement & Authorization						
Please read the following statements. (Initial each paragraph and sign below)						
I certify that the above information is accurate and true to the best of my knowledge. In the event of my employment, I understand and agree that false or misleading information given in my application or interview(s) may result in discharge. Initial:						
I understand that this application is for informational purposes only and does not constitute an offer of employment or an employment contract. If an employment relationship is later established, I understand my right to resign at anytime for any reason. I also understand that this company may also terminate my employment at any time, for any reason not prohibited by law. Initial:						
I authorize U&F Sons Inc.d.b.a.: Sahara Asian Elderly Care to inquire and investigate into my employment, educational, professional, criminal and other background as needed to verify the information on this application and research my qualifications for this position. Initial:						
I hereby release U&F Sons Inc. d.b.a.: Sahara Asian Elderly Care from all liability that might result from such investigation into my background. Initial:						
I hereby acknowledge that I have read and agree to the above statements.						
Signature: Date:/						

REMARKS:						
Interviewed by: Date://						
APPROVAL:						
Hiring Date:/ Position:						
President / Manager:						