

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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How Did You Learn About Us?

- Advertisement Relative Inquiry
 Employment Agency Friend Other _____

Last Name	First Name	Middle Name
Address	Number	Street
	City	State
		Zip Code
Telephone Number(s)	Social Security Number (voluntary)	

Best time to contact you at home is: : ^{AM}/_{PM}

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If Yes, give date _____

Have you ever been employed with us before? Yes No

If Yes, give date _____

Do any of your friends or relatives, other than spouse, work here? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status

Proof of citizenship or immigration status will be required upon employment. Yes No

Date available for work ___/___/___ What is your desired salary range? _____

Are you available to work: Full-Time (please indicate 1 2 3 shift)

Part-Time (please indicate Mornings Afternoon Evenings)

Temporary (please indicate dates available ___/___/___ - ___/___/___)

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					
2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					
3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					
4.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

INTERVIEWER DATE

Employed Yes No

Date of Employment _____

Job Title _____ Hourly Rate/
Salary _____ Department _____

By _____

NAME AND TITLE

DATE

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Direct Support Professional (DSP)

Position Description:

The Direct Support Professional (DSP) reports to the Program Manager and is directly responsible to them for the successful performance of his/her job functions. The DSP provides services directly to clients of ILS so that they can live in the community as any other person. DSPs are responsible for providing a stimulating environment, encouraging independence through teaching and showing clients how to do things, helping clients to keep a healthy and clean home and yard, if they have one, and following all aspects of the client's Person-Centered Plan.

Responsibilities:

- Provide support, supervision and training to residents to ensure health and safety and provide any necessary personal care. Personal care includes bathing, tooth brushing, toileting/diapering, etc.
- Coordinate and implement all resident programs as outlined in the PCP
- Provide maintenance, housekeeping, laundry and food preparation as needed
- Maintain accurate daily documentation in all logs and program books in a timely and professional manner
- Communicate and coordinate with other staff on a regular basis via house reporting systems
- Report any unusual observations or concerns to direct supervisor and seek guidance to resolve problems
- Attend regular staff meetings and provide input
- Responsible to provide frequent opportunities for clients to go out in the community
- Responsible to ensure that the client's environment provides adequate stimulation and interesting activities that are of interest to the individual
- Responsible to engage the client every fifteen minutes at a minimum and provide "active treatment"
- Complete clients' PCS forms
- Must be able to respond to emergencies in a calm, reasonable fashion
- Must be able to transport clients using agency vehicles when necessary
- Other duties as assigned

Position Qualifications:

- High School graduate or equivalent.
- Able to supervise clients' self-medication programs, with training
- Ability to lift/transfer individuals weighing up to 125 lbs., with training.
- Have, or willing to get, HCA or CNA, or NAR with 75 hours of required training, Washington State Driver's License, Proof of CPR and First Aid certification, recent TB test, Food Handler's Permit and other training as necessary.
- Must pass a criminal background inquiry as required by law upon hire.

Non-Discrimination

Integrated Living Services is an equal opportunity employer. Integrated Living Services does not discriminate against any person on the basis of race, color, creed, national origin, families with children, religion, sex, age, genetic information, political activities or the presence of any sensory, mental or physical disability, marital status, sexual orientation, gender expression or identity, honorably discharged veteran or military status, the presence of HIV/AIDS virus or against those who require the use of a trained guide dog or service animal in either employment or program participation opportunities and any other reasons prohibited by law, nor does Integrated Living Services tolerate such behavior.

*Employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time. The Administrator may not alter the "at-will" nature of employment.

Employee Name: _____

Acceptance of job description (Signature): _____ Date: _____