

Temporary Resident/Work Exchange Application

Email completed application to michael@indianacommunity.org



Date:

Name:

Address:

City:

State/Province:

Zip/Postal Code:

Email

Home Phone:

Cell Phone:

Emergency Contact Person and Phone:

Living Roots
5907 W. County Road 375 South
French Lick, IN

47432
Phone: 812-727-5444
www.indianacommunity.org

Please explain why you would like to become a member at Living Roots.

What specific experience, formal or informal, do you have with community living and/or the job you are applying for (if applying for work exchange)?

Education

Type of School	Name of School and Complete Mailing Address	No. Years Completed/Date	Major or Degree/GPA
High School			
College Bus. or Trade School			
Professional School			
Other			

(Background Check will be run further into the application process - At that time, applicant will be asked to pay \$18.95 for this.)

Have you ever been convicted of a crime: yes no
If yes, please explain

Do you have a drivers license? yes no

State of issue:

Have you had any accidents in the past 3 years? yes no

How many?

Do you had any moving violations in the past 3 years? yes no

How many?

Continue on the next page

Previous Employment (list up to 3)

1.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

2.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

3.

Name of Employer:

Name of last supervisor:

Dates of employment:

From: To:

Salary:

From: To:

Complete Address:

Phone #:

Last job title:

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

Skills:

Hobbies/
Passions:

Please list 2 references other than relatives and previous employers

Name	<input type="text"/>	<input type="text"/>
Position	<input type="text"/>	<input type="text"/>
Company	<input type="text"/>	<input type="text"/>
Telephone	<input type="text"/>	<input type="text"/>

Use this space to add any additional information necessary to describe your full qualifications for the position which you are applying: