

TERMS OF APPLICATION AND UNDERSTANDING OF EMPLOYMENT RELATIONSHIP

Descriptions of job duties outlining the functions of positions applied for are available for review. You are encouraged to review the description of job duties carefully and to discuss with Human Resources any accommodation that may be necessary to enable you to perform the essential functions for the positions for which you are applying.

I understand that all job offers are made by Like Family Home Care Human Resources.

I hereby state that all the information that I provided on this application, or any other document submitted in connection with my employment, and in any interview, is true and correct. I have withheld nothing that would, if disclosed, affect this Application unfavorably. I understand that if I am employed and any information is later found to be false in any respect or if I have omitted material information, I may be dismissed. I understand that if selected for hire, it will be necessary for me to **Like Family Home Care LLC** provide satisfactory evidence of my identity and legal authority to work in the United States. I authorize to make an investigation that may include, but is not limited to, current and past employment, academic credentials, credit history, criminal record, and I also hereby release from liability **Like Family Home Care** and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information

I understand that an offer of employment is contingent upon receipt of satisfactory reference(s), drug screening test results, and criminal history background check results.

I understand that if I am hired by **Like Family Home Care**, I will be an at-will employee, and that nothing in this employment application, in any other document, or in any statement by anyone at **Like Family Home Care** now or later creates an agreement between **Like Family Home Care LLC** and me for employment for any period. Either **Like Family Home Care** or I can end our employment relationship at any time. I hereby acknowledge that I have read and understand the above statements.

APPLICANT SIGNATURE :

DATE : _____