

Franks Golden Girls LLC
1130 W Jewell St
Wichita, KS 67213
franksmedicalstaffing@gmail.com
(316) 807-3743

Employee Application Form

First Name: _____

Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address (Required): _____

Date of Birth: _____

Are you a smoker? (To determine placement with clients, not hiring.)

- ☐ Yes
☐ No

Availability (Please Check All that Apply):

- ☐ Full-Time Day Shift
☐ Full-Time Night Shift
☐ Part-Time Day Shift
☐ Part-Time Night Shift
☐ PRN (Per Required Need)
☐ No Preference

What are the minimum hours you need each week?

How far are you willing to drive for a 12 hour shift? (enter hours) _____

How far are you willing to drive for a 24 hour shift? (enter hours)

Are you available weekends? ☐ Yes ☐ No

If you do not live in Kansas, are you willing to drive to KS or OK for work?

- ☐ Yes
☐ No

Education—Please Select Highest Level Completed:

- ☐ Some High School
☐ Graduated High School

☐ GED
☐ Some College
☐ Graduated College

Transportation Information:

- Do you drive? ☐ Yes ☐ No
Do you have a dependable car? ☐ Yes ☐ No
Do you have a Valid Driver's License: ☐ Yes ☐ No

Experience (Please check all that apply):

- ☐ C.N.A.
☐ Home Health Aide
☐ Home Care Experience
☐ Long Term Care Experience
☐ Other

If "Yes" please specify:

Routing Number: _____

Acct Number: _____

Sign : _____

Date: _____