SINCERE HOME CARE
REAL PEOPLE. SUPREME SUPPORT.

Background Study Authorization

Background study result must be complete, cleared and in accordance with Minnesota Statue 245C.14 before an employee candidate receives a hire date and allowed to begin working for Sincere Home Care. Sincere Home Care Human Resource department will notify the potential staff, client (if applicable) and/or the responsible party of an employee's employment eligibility upon receipt of the background study results.

THE FOLLOWING MUST BE COMPLETED BY THE EMPLOYEE. *** = Required Fields**

*Employee's Name: _____ _____ _____
First Name Middle Name Last Name

*Birthdate: _____ / _____ / _____ *Gender: ☐ Male ☐ Female

*Place of Birth (State) _____ *Eye Color: _____ *Hair Color: _____

*Race: _____ *Weight (on picture ID): _____ * Height (on picture ID): _____

*US Citizen: ☐ Yes ☐ No *MN Driver's License/State ID #: _____

*Permanent Address: _____ _____ _____ _____
Street Address City State ZIP

*Mailing Address: _____ _____ _____ _____
Street Address City State ZIP

* Have your lived outside of Minnesota anytime since September 2013. If so, please list other states lived outside of Minnesota.

*City/State: _____ *Month/Date/Year: _____

*City/State: _____ *Month/Date/Year: _____

*City/State: _____ *Month/Date/Year: _____

*Please list all former first and last names: _____

_____

*Social Security Number: _____ - _____ - _____ *Phone Number: (_____) - _____ - _____

I authorize Sincere Home Care to conduct a background study for the purpose of evaluating my potential employment with their agency. I verify that all the above information is correct to the best of my knowledge.

_____ _____
Employee Signature Date