



In-Home Services Application

Please read the information below regarding each position.

You may apply for both positions with the same form.

In-Home Worker

(Provides Respite and Chore Services)

- ◆ **Position Eligibility:** It is the goal of the Alzheimer's Disease Resource Agency of Alaska, Inc. to hire well-qualified applicants. A job description is attached for you to consult. You must meet the position requirements in order to be considered for a position.
- ◆ **Application Materials:** Please fill out the application completely and accurately, including all information which is relevant to the position. You may submit additional information or resumes, but they do not substitute for fully completing the application form. Any supplements should be on 8.5 x 11 paper. **If your application form is not completely filled out, your application will not be considered.**
- ◆ **Application Status:** We do not send out notices concerning the receipt or status of your application. All applications submitted will be kept on file for six months after they are received. If after six months you want to again be considered, you must submit a new application.
- ◆ **Interviews:** As needed, the most qualified applicants will be selected and contacted for interviews. If you cannot be contacted in a reasonable amount of time, another applicant may be selected.
- ◆ **Employment Requirements:**
If you are offered a position, you will be required to:
 - Provide proof of negative tuberculosis screening.
 - Provide proof of current CPR and 1st Aid certification.
 - Submit one card of fingerprints made at no cost to you for the purpose of state and federal criminal background checks.
 - Complete Employment Eligibility Verification Form I-9, and provide two acceptable forms of ID.
 - Complete all of the Conditions of Employment prior to your first day of work

Personal Care Assistant (PCA)

After submitting your completed PCA application, your name, phone number, and general information will be placed on the Alzheimer's Disease Resource Agency of Alaska, Inc.(ADRAA) PCA Call List. The PCA Call List will be made available to consumers who are a part of our agency's Consumer Directed PCA program and are looking for a PCA. If the consumer is interested in interviewing you, he/she will contact you directly and set up an interview appointment. In the Consumer Directed Program, the consumer hires, trains, and supervises the PCA. ADRAA oversees the process and is the payroll agent.

- ◆ **Application Materials:** Please fill out the application completely and accurately, including all information, which is relevant to the position. You may submit additional information or resumes, but they do not substitute for fully completing the application form. Any supplements should be on 8.5 x 11 paper. **If your application form is not completely filled out, your application will not be considered.**
- ◆ **Application Status:** All applications will be kept on file for six months after they are received. Your name will be included on the PCA Call List for six months unless you notify us for an earlier removal.
- ◆ **Employment Requirements:** The level of training and/or skills that you need for this position is determined by the consumer. If you are offered a PCA position, you will be required to:
 - Provide proof of a negative tuberculosis screening.
 - Provide proof of current CPR and 1st Aid certification.
 - Provide one fingerprint card at your cost or ADRAA offers fingerprinting by appointment at no additional cost for PCA new hires.
 - Submit a check payable to the State of Alaska for processing criminal background check.
 - Complete Employment Eligibility Verification Form (I-9), and submit two acceptable forms of identification.
 - Complete all Conditions of Employment prior to your first day of work.

Alzheimer's Disease Resource Agency of Alaska, Inc.
Job Description

Position Title: **In-Home Worker**

Department: **In-Home Services**

Reports to: **In-Home Services Manager**

General Definition: Provide part-time, temporary, supportive care for persons with Alzheimer's disease or related disorders (ADRD), and the frail elderly. The duties of the program include, but are not limited to, providing non-medical custodial care and housekeeping services under the direction of the In-Home Services Program staff. The position will communicate with family, In-Home Services Program staff and client to ensure the delivery of quality care and services.

Essential Job Functions:

- Maintain effective communication with In-Home Services Program staff, families and clients.
- Complete "In-Home Worker Timesheets", "In-Home Worker Activity Notes" and all other paperwork requested by the agency.
- Provide direct non-medical care for clients.
- Provide companionship and meaningful social and recreational activities.
- Monitor the safety needs of the client to ensure safe surroundings and, if necessary, take emergency action set forth by the agency.
- Provide housekeeping services for clients.
- Schedule work times with the assigned family and the agency.
- Participate in 10 hours of client care related in-service training annually.
- Meet with the family caregiver for input and instruction concerning special needs.
- Engage in stimulating activities with client.
- Prepare light meals and assist client with feeding.
- Assist with the client's toileting routine.
- Assist with activities of daily living and basic hygiene care.
- Remind client to take medication per caregiver's instructions and agency policy.
- Perform other duties as assigned by supervisors.

Requirements and Qualifications:

- Must be 18 years of age or older.
- Six months experience in non-medical care of elders with Alzheimer's disease and related disorders (ADRD) and/or the frail elderly.
- Ability to communicate in English, both verbally and in writing.
- Have the skills to work independently, schedule work hours with both the family and the agency.
- Use independent judgment interpreting agency rules and policies following consultation with a supervisor.
- Current CPR/First Aid certification.
- Meet all employment conditions established by the agency.
- Valid Alaska driver's license and proof of auto insurance.
- Negative TB screening.

Essential Physical Tasks:

- Must have the ability to perform lifting and transferring of no less than fifty pounds, and demonstrate good body mechanics while performing these tasks.
- Must be able to climb stairs and access individuals in non-accessible rooms or apartments.

IN-HOME SERVICES APPLICATION

Alzheimer's Disease Resource Agency
 1750 Abbott Rd.
 Anchorage AK 99507
 (907) 561-3313 or (800) 478-1080
 Fax (907) 561-3315

Last Name		First Name		MI	Date
Mailing Address			City	State	Zip
Home Phone	Work Phone	Message Phone	Leave Message With		

I am interested in applying for: In-Home Worker _____ Personal Care Assistant _____

How did you hear about this agency? _____

What days and hours are you available to work for our agency? _____

Can you provide proof of eligibility to work in the United States? Yes ____ No ____

Have you ever been convicted of a criminal offense? Yes ____ No ____

If yes, please explain fully on a separate sheet of paper.

EDUCATION

School Name	City/State	Graduated?	Major	Degree
High School				
College/University				
Technical/Trade School				
Business School				
Other Training				

Professional Licensing: _____

Type:

License

Certificate

Number: _____

State: _____

Expiration Date: _____

Languages Spoken: _____

Employment Record

Start with present or most recent, list previous employers. Include self-employment, volunteer, summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Dates Worked From To	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
Last or Present Employer				Description of Duties
Street Address		City, State ZIP		
Supervisor's Name		Telephone		
Reason for Leaving				
Dates Worked From To	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
Employer				Description of Duties
Street Address		City, State ZIP		
Supervisor's Name		Telephone		
Reason for Leaving				
Dates Worked From To	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
Employer				Description of Duties
Street Address		City, State ZIP		
Supervisor's Name		Telephone		
Reason for Leaving				
Dates Worked From To	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
Employer				Description of Duties
Street Address		City, State ZIP		
Supervisor's Name		Telephone		
Reason for Leaving				

References

List four references that have knowledge of your work experience and abilities. At least one should be a previous employer.

Name	Relationship	Address	Daytime Phone Number
Name	Relationship	Address	Daytime Phone Number
Name	Relationship	Address	Daytime Phone Number
Name	Relationship	Address	Daytime Phone Number

I authorize the Alzheimer's Disease Resource Agency of Alaska, Inc., their staff and representatives to consult (via telephone or written communication) persons with whom I may have been associated, including past and present employers and personal references who may have information pertinent to my competence, character and ethics. I release from liability all representatives of the Alzheimer's Disease Resource Agency of Alaska, Inc. for their acts performed in good faith and without malice in connection with evaluating my application. I release from liability all individuals and organizations who provide information to the Alzheimer's Disease Resource Agency of Alaska, Inc. in good faith and without malice concerning my competence, character, ethics and other qualifications.

I certify that I have read and understand the Information and Instructions on this form. That all statements made on this application is true and complete to the best of my knowledge. Any false statements on this application or during interviews will subject me to disqualification or immediate dismissal.

Name (please print or type)

Signature

Date