
Caring 4 U LLC
6 Pidgeon hill dr, Suite 106.
Sterling, VA 20165
Phone: 571 436 5199/ 571 436 5189

EMPLOYMENT APPLICATION

Page 2

| Date Month and Year | Name and address of employer | Phone Number | Salary | Job | Reason for Leaving |
|------------------------|---------------------------------|-----------------|--------|-----|-----------------------|
| From | | | | | |
| To | | | | | |
| From | | | | | |
| To | | | | | |
| From | | | | | |
| To | | | | | |

References: Give the names of three persons not related to you to whom you have known at least 1 year

| Name | Address | Phone | Yrs acquainted |
|------|---------|-------|----------------|
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List any foreign language(s) and check the box that best describes your skill level.

| Language | Read and write | Read and speak | Speak only |
|----------|----------------|----------------|------------|
| | | | |
| | | | |

In case of
Emergency notify _____

Name Address Relationship Phone

INITIAL Conditions of Employment – please read carefully

_____ Reporting to work with impaired abilities; or the possession, consumption or distribution of drugs or alcohol on company premises and/or worksites, shall be grounds for disciplinary action, including discharge. A condition of employment includes willingness on the part of the applicant or employee to agree to the terms put forth by Caring 4 You. We are committed to operating a drug free workplace. Violations of our drug and alcohol policy will result in dismissal.

_____ It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation

from the employer's service if I have been employed. Furthermore, I understand that just as I am free to resign anytime, the Employer reserves the right to terminate my contract at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

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Page 3

_____ I give the employer the right to investigate all police, driving, and personal records and references, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

_____ The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, State or Federal law.

_____ Any controversy of any kind arising between the parties under this agreement or otherwise (or any agent, officer, director or affiliate of any party), including but not limited to common law, statutory, tort or contract claims, will be submitted to mediation and failing settlement in mediation, to binding arbitration. Unless otherwise agreed a mediation and arbitration designated by staff professionals will govern any mediation and arbitration. The parties will select the mediator or arbitrator from the designated company panel of mediators and will notify the designated company, in writing, to initiate the selection process. The arbitration will be subject to and governed by the provisions of the Federal Arbitration Act. 9 U.S.C. Section 1-et seq. The parties hereto stipulate that this agreement involves matters affecting interstate commerce.

_____ This application is current for 90 days. At the conclusion of this time if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to fill out a new application.

Signature of Applicant

Date

AGENCY MANAGEMENT NOTES :

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