



## Social And Travel Program Independent Contractor Application

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TODAY'S DATE \_\_\_\_\_

Name (last) \_\_\_\_\_ (first) \_\_\_\_\_ (middle) \_\_\_\_\_

Present Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Why are you interested in travelling? \_\_\_\_\_

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What skills or qualities do you have that would make you a good person to chaperone adults with intellectual and developmental disabilities on trips? \_\_\_\_\_

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Please list any relevant trainings you have taken that would correlate to your travel responsibilities.

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Are you able / interested in providing services for someone who cannot be left unattended? \_\_\_\_\_

When would you be available to begin providing services? \_\_\_\_\_

Is there anything else you want us to know? \_\_\_\_\_

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List some leisure activities and hobbies that you enjoy

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List some recreation and community activities that you participate in

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**Have you ever been convicted of a crime that resulted in plea of guilty, no contests deferred prosecution or conviction of any law violation (except minor traffic violations)? Yes \_\_\_ No \_\_\_.**

**If yes, list for each conviction (1) Date of offense; (2) Charge; (3) Jurisdiction; (4) Court name and (5) Disposition.**

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**Have you ever been involved in an incident involving child/elder/person with disabilities abuse, or child/elder/person with disabilities neglect? Yes \_\_\_ No \_\_\_**

**If yes, please explain:**

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A background check will be conducted on applicants selected as and Independent Contractor as well as on all members of your household over the age of 18.

Do you drive a vehicle? Yes \_\_\_ No \_\_\_

Vehicle Type: Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Do you have a Drivers License? Yes \_\_\_ No \_\_\_ License Number: \_\_\_\_\_



State of issue \_\_\_\_\_ Operator \_\_\_\_ Commercial (CDL) Expiration: \_\_\_\_\_

Have you had any accidents during the past three years? How many? \_\_\_\_\_

Have you had any moving violations during the past three years? How many? \_\_\_\_\_

**Education**

**Name of school    Location    Number of years completed    Major/Degree**

High school \_\_\_\_\_

College \_\_\_\_\_

Trade School \_\_\_\_\_

List any professional designation \_\_\_\_\_

**Other special knowledge, skills or qualifications**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References – we need to have at least 3 references total between employers and personal.**

Please list two references other than relatives or previous employers.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Position: \_\_\_\_\_

Company: \_\_\_\_\_ Company: \_\_\_\_\_ Address: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Position: \_\_\_\_\_ Position: \_\_\_\_\_



Company: \_\_\_\_\_ Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_ Email: \_\_\_\_\_

**Employment History – or attach resume with all information**

**Employer Name (1)** \_\_\_\_\_  
**Employer Address** \_\_\_\_\_  
**Employed From:** \_\_\_\_\_ **Until:** \_\_\_\_\_  
**Supervisor's Name:** \_\_\_\_\_ **Supervisor's Phone #** \_\_\_\_\_  
**Supervisor/Employer's Email:** \_\_\_\_\_  
**Reason for leaving:** \_\_\_\_\_  
**Job Title:** \_\_\_\_\_  
**Duties:** \_\_\_\_\_

**Employer Name (2)** \_\_\_\_\_  
**Employer Address** \_\_\_\_\_  
**Employed From:** \_\_\_\_\_ **Until:** \_\_\_\_\_  
**Supervisor's Name:** \_\_\_\_\_ **Supervisor's Phone #** \_\_\_\_\_  
**Supervisor/Employer's Email:** \_\_\_\_\_  
**Reason for leaving:** \_\_\_\_\_  
**Job Title:** \_\_\_\_\_  
**Duties:** \_\_\_\_\_

May we contact your current employer for references?     Yes     No



## **CERTIFICATION & AUTHORIZATION**

I certify that the information in this application is true and complete. I understand that in the event of my contracting with FRIENDS, I shall be subject to termination of my Contract, if any information that I have given in this application, the background release form, in any resume or interview or any part of the contracting process is false or misleading or if I have failed to give any information herein requested, or if I have withheld relevant information, regardless of the time elapsed after discovery.

I authorize FRIENDS to inquire into my educational, professional and past employment history referenced as needed to research my qualifications. I hereby give my consent to any former employer to provide employment-related information about me to FRIENDS and will hold FRIENDS and my former employer harmless from any claim made on the basis that such information about me was provided or that any contract decision was made on the basis of such information. I further authorize FRIENDS to obtain any credit and consumer check. I understand that FRIENDS will provide a separate Disclosure and Release required by law that will permit FRIENDS to make such inquiries through the services of a third party.

If contracted, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986.

I hereby acknowledge that I have read and agree to the above statements. I certify that the information I provided for the application is accurate, current and complete.

Signature \_\_\_\_\_ Date \_\_\_\_\_