



81 Lancaster Ave., Suite 202

Malvern, PA 19355

phone: 610-644-3700

fax: 610-644-5560

website: [www.pacareathome.com](http://www.pacareathome.com)

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Dear Applicant,

Thank you for your interest in employment with There's No Place Like Home In-Home Care. We are a full service non-medical in-home care agency that provides superior quality care and assistance to seniors, disabled adults and people with chronic illnesses.

We are pleased to enclose our employment application. In order to be considered for employment, you must schedule an interview. Please call 610-990-6992 and leave your name and phone number. We will contact you to schedule your interview. We generally interview on Wednesday's and Thursday's.

What you should bring to your interview:

1. Your fully completed employment application.
2. Your driver's license or state issued identification card.
3. Your Social Security card, passport, permanent resident card or alien registration card.
4. A clean Pennsylvania background check. This document may be obtained by going to the PA State Police Pennsylvania Access to Criminal History (PATCH) website location: <https://epatch.state.pa.us/Home.jsp>.
  - a. if you are unable to obtain the required State of Pennsylvania background check document we will order it for you for a fee of \$15.00. Please bring cash to cover this fee.
  - b. **Note:** If you have lived outside of the state of Pennsylvania within the last two years, you should contact the Pennsylvania Department of Aging at 717-265-7887 to obtain the required documentation.
5. A two step PPD test is now required in Pennsylvania. Bring your completed negative two step TB skin test (PPD test) which has been affirmed by a licensed healthcare professional. If you tested positive for your TB skin test bring a physicians statement based on a chest X-Ray that states that you do not have Tuberculosis.
6. Bring any professional certification(s) documentation that you have such as CNA card, Home Health Aide card, and First Aid and/or CPR cards.

All candidates, other than currently licensed CNA's and RN's, must complete and pass a state required proficiency examination. For Companions and Drivers the exam consists of 29 questions which must be completed in 20 minutes. For applicants interested in providing a higher level of care, the Personal Care Assistant's exam includes the 29 Companion questions plus an additional 36 personal care questions. These 65 questions must be completed within 50 minutes. A passing score of 70% or better is required. **Please allow yourself enough time to take the examination.**

Remember, you must call 610-990-6992 to schedule your interview. Leave your name and phone number and we will contact you. **We do not accept walk-ins.**

We thank you for your interest in There's No Place Like Home In-Home Care and look forward to hearing from you soon.

**Directions to our office are on the back of this letter.**

## Directions to the office of There's No Place Like Home In-Home Care

Our Address is: 81 Lancaster Ave., Suite 202, Malvern, PA 19355. Our Phone number is: 610-644-3700.

### From: Philadelphia

Take I-76 West/SCHUYLKILL EXPRESSWAY. Take the US-202/US-422 West exit, EXIT 328B-A, toward King Of Prussia/West Chester/Pottstown. Merge onto US-202 South via EXIT 328A toward West Chester. Take the exit for Route 29 South – Malvern. Go right at the top of the exit onto SWEDESFORD Rd. Turn RIGHT onto MOREHALL Rd/Route 29 South. Go one block to LANCASTER Ave/Route 30. Turn RIGHT onto LANCASTER Ave./Route 30. Go one block. Look for the **Taco Bell–KFC** on the right. Turn right into the **Taco Bell–KFC/Great Valley Center Shopping Center** and drive past the **Taco-Bell-KFC** and Subway restaurant. At the stop sign go right and drive into the shopping center area. Look for Vogue Nails which is about halfway down the row of stores. Park your car. To the right of **VOGUE NAILS**, look for our sign above the pair of doors that lead into the lobby. These doors are located just to the left of the blue mailbox. Go in the lobby and go to the second floor. Go left down the hallway to last suite on left #202.

### From: Delaware County

Get onto Route #1/STATE Rd. Continue to follow Route 1 South. Take the Route 252 North exit. At the top of the exit turn RIGHT onto N. PROVIDENCE Rd/Route 252. Continue to follow N. PROVIDENCE Rd/Route 252 North for 9.5 miles. Turn LEFT onto LANCASTER Ave/Route 30 (there is a Boston Market restaurant on the left). Continue to follow LANCASTER Ave/Route 30 West for 2.8 miles. Continue past Paoli Memorial Hospital and Sunrise Assisted Living which is on the left. Continue past MOREHALL Rd/Route 29. Go one block. Look for the **Taco Bell–KFC** restaurant on the right. Turn right into the **Taco Bell–KFC/Great Valley Center Shopping Center** and drive past the **Taco Bell–KFC**. At the stop sign go right and drive into the shopping center area. Look for **VOGUE NAILS** which is about halfway down the row of stores. Park your car. To the right of **VOGUE NAILS**, look for our sign above the pair of doors that lead into the lobby. These doors are located just to the left of the blue mailbox. Go in the lobby and go to the second floor. Go left down the hallway to last suite on left #202.

### From: Points East via PA Turnpike

From the PA Turnpike take the I-76 West exit, EXIT 326, toward Valley Forge and merge onto I-76 West. Take the US-202/US-422 West exit, EXIT 328A-B, toward King Of Prussia/West Chester/Pottstown. Merge onto US-202 South via EXIT 328A toward West Chester. Take the exit for Route 29 South - Malvern. Go right at the top of the exit onto SWEDESFORD Rd. and turn right at the second traffic light onto MOREHALL Rd/Route 29. Go one block to LANCASTER Ave/Route 30. Turn right onto LANCASTER Ave/Route 30 and go one block. Look for the **Taco Bell–KFC** restaurant on the right. Turn right into the **Taco Bell–KFC/Great Valley Center Shopping Center** and drive past the **TacoBell-KFC** and Subway restaurant. At the stop sign go right and drive into the shopping center area. Look for **VOGUE NAILS** which is about halfway down the row of stores. Park your car. To the right of **VOGUE NAILS**, look for our sign above the pair of doors that lead into the lobby. These doors are located just to the left of the blue mailbox. Go in the lobby and go to the second floor. Go left down the hallway to last suite on left #202.

### From West Chester

Take Rt. 202 North to Route 401/CONESTOGA Rd. Take the Route 401 Exit and go East on Route 401. Go about 3 miles. Go past Peoples Light & Theater on the left. Just before the intersection with LANCASTER Ave/Route 30, make a left into **Great Valley Center Shopping Center**. Look for **VOGUE NAILS** which is about halfway down the row of stores. Park your car. To the right of **VOGUE NAILS**, look for our sign above the pair of doors that lead into the lobby. These doors are located just to the left of the blue mailbox. Go in the lobby and go to the second floor. Go left down the hallway to last suite on left #202.

### From Exton and Downingtown

Take Route 30 East. Go Past Route 352. Go about 1.7 miles further and look for the McDonalds on the right. At the McDonalds, turn Left onto Route 401/CONESTOGA Rd. Make immediate RIGHT into **Great Valley Center Shopping Center**. Look for **VOGUE NAILS** which is about halfway down the row of stores. Park your car. To the right of **VOGUE NAILS**, look for our sign above the pair of doors that lead into the lobby. These doors are located just to the left of the blue mailbox. Go in the lobby and go to the second floor. Go left down the hallway to last suite on left #202.

### From the Western Main Line (Paoli, Berwyn, Devon, Wayne, Radnor, Bryn Mawr, Ardmore, Wynnewood)

Take LANCASTER Ave/Route 30 West. Stay on LANCASTER Ave/Route 30 and go past Paoli Memorial Hospital and then go past Sunrise Assisted Living, which is on the left. Go one block past MOREHALL Rd/Route 29 look for the Taco Bell – KFC restaurant on the right. Turn right into the **Taco Bell–KFC/Great Valley Center Shopping Center** and drive past the **Taco Bell–KFC**. At the stop sign go right and drive into the shopping center area. Look for **VOGUE NAILS** which is about halfway down the row of stores. Park your car. To the right of **VOGUE NAILS**, look for our sign above the pair of doors that lead into the lobby. These doors are located just to the left of the blue mailbox. Go in the lobby and go to the second floor. Go left down the hallway to last suite on left #202.



## There's No Place Like Home In-Home Care

81 Lancaster Ave., Suite 202  
 Malvern, PA 19355  
 610-644-3700

### EMPLOYMENT APPLICATION

Thank you for considering employment with **There's No Place Like Home In-Home Care**. We would like to advise you that we strive to hire the best-qualified candidate for each position. We comply with all regulatory agencies for reporting and disclosing appropriate information. Because we deal with the elderly, we are required to do a criminal background check. We are required to comply with these laws and want to take this opportunity to inform you of this. Please complete all questions on the application.

**PLEASE PRINT**

Name:		Date:
Street Address:		
City, State, Zip:		
Home Phone:	Cell Phone:	
Email address:		
List all addresses for past 2 years:		
Social Security Number:	How did you hear about our agency?	
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:		
Position applying for: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Live-In		Date available to start:
What days and times would you like to work?		
What days or times can't you work?		
What counties/areas are you willing to travel to? <input type="checkbox"/> Chester County <input type="checkbox"/> Delaware County <input type="checkbox"/> Montgomery Co. <input type="checkbox"/> Western Main Line		
May we call you at the last minute if we have an emergency job that needs to be filled? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Vehicle and Operator Information**

Do you own a dependable car? <input type="checkbox"/> Yes <input type="checkbox"/> No	Make & Model Year of Car:	
Are you licensed to drive in PA? <input type="checkbox"/> Yes <input type="checkbox"/> No	Drivers License #:	State:

<b>Experience</b> - Please indicate which of the following services you have performed for senior citizens or disabled adults.			
Companionship:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Cooking:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dressing:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Alzheimer's / Dementia:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathing:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Incontinence/Toileting:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Grooming:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Grocery Shopping:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Housekeeping/Laundry:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Driving to Appointments/Shopping:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bed Linen Changing:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Transfer Assistance:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Experience: <input type="checkbox"/> Hoyer Type Lift <input type="checkbox"/> Oxygen Equipment <input type="checkbox"/> Ostomy <input type="checkbox"/> Transfer Board			

<b>Work History</b> – Please list the most recent first.			
Employer:			
Address:			
Supervisor:		Phone:	
Duties:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start Date & Salary:	\$	End Date & Salary:	\$
Reason for leaving:			

Employer:			
Address:			
Supervisor:		Phone:	
Duties:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start Date & Salary:	\$	End Date & Salary:	\$
Reason for leaving:			

Employer:			
Address:			
Supervisor:		Phone:	
Duties:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Start Date & Salary:	\$	End Date & Salary:	\$
Reason for leaving:			

<b>In Case of Emergency whom should we Contact?</b>	
Name:	
Phone:	Relationship to applicant:

Education	School Name - City, State or Country	Years Completed	Course of Study	Degree Earned
High School				
College or Business School				
Other training or course work				

Certifications – Please list and bring with you	Date Certified	State or Country	Expiration Date

**References** - Please list three persons not related to you, whom you have known at least one year. References help us to make the right hiring decisions. We contact previous employers as well as personal references.

Name	Address	Phone	Years Known

General Preference Questions	
Do you smoke?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing and able to work with clients who smoke?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to work with client's that have pets? i.e.: cats, dogs, birds, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you live near public transportation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How will you get to your assigned jobs? <input type="checkbox"/> my own car <input type="checkbox"/> friends car <input type="checkbox"/> someone will drive me <input type="checkbox"/> bus <input type="checkbox"/> other	
Are you willing and able to work with blind clients?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing and able to work with amputees?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing and able to work with bedridden clients	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p><b>CERTIFICATION AND RELEASE:</b> Please read the following statements completely and carefully. If you agree please sign and date.</p> <p>I certify that I have read and understand this application. Under penalty of perjury, I hereby certify that all statements made herein are true and correct to the best of my knowledge and authorize investigation of all statements herein recorded. I understand that any false information, omissions, or misrepresentation of facts called for in this application may result in the rejection of my application or discharge at any time during my employment.</p> <p>I authorize There's No Place Like Home In-Home Care and/or its agents, including consumer reporting bureaus, to verify any information including, but not limited to, criminal history and motor vehicle driving records. I authorize all persons, schools, companies, and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information.</p> <p>I hereby affirm that I am legally able to work in the state of Pennsylvania and the United States of America.</p> <p>I agree that if employed, I will abide by all policies and procedures established by There's No Place Like Home In-Home Care. I also understand that submission of this application does not guarantee my employment. Further, I understand that if I am hired, nothing herein modifies in any way my "at-will" employment relationship with There's No Place Like Home In-Home Care.</p>	
Signature:	Date:

**To be considered for employment, you must schedule an interview. Please call our employment Hot-Line number 610-990-6992 and leave your name and telephone number. We will contact you. Do not call our main office number 610-644-3700 for interviews.**

There's No Place Like Home In-Home Care is an equal opportunity employer. All employment decisions and advancement opportunities will be based on merit, qualifications and abilities. There's No Place Like Home In-Home Care does not discriminate as respects employment opportunities or assignments on the basis of race, sex, color, national origin, religion, ancestry, creed, handicap, age, or any other characteristic protected by law. Our policy is to make reasonable accommodations for handicapped employees.