



**learning never ends**

**Learning Never Ends, LLC**

5909 Cleveland Ave., Columbus, Ohio 43231  
(614) 899-8100 LNEohio.com

Thank you for applying with Learning Never Ends, LLC! We are honored that you have decided to become a part of our team. In order to be a successful employee at Learning Never Ends, it is necessary to understand the following statements:

Please initial the following:

- ☐ I understand that part of my availability must include working on a Saturday **or** Sunday.
- ☐ I understand that I must have a reliable vehicle on shift at all times.
- ☐ I understand that on the date of hire, I must have proof of car insurance.
- ☐ I understand that I must have an Ohio Driver License
- ☐ I understand that I cannot change my availability within the first 6 months of employment.
- ☐ I understand that I must be at least 18 years of age.
- ☐ I understand that I must provide a High School Diploma or equivalent document.
- ☐ I understand that I will have to drive to the various locations that I am assigned. We serve consumers all over Franklin County.

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Applicant Name

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Applicant Signature

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Date

## EMPLOYMENT APPLICATION

Learning Never Ends, LLC is an equal opportunity employer providing opportunities for applicants & employees based upon qualities such as ability, performance, skill potential, and general fitness without regard to race, color, religion, sex, national origin, ancestry, age, or handicap.

Our company's policy requires that any person interested in employment complete a written application for a particular position for which he or she is qualified. No applicant will be considered for employment solely on the basis of a resume. Applicants who do not provide complete and accurate answers to all application and interview questions will not be considered for employment.

**Employment requirements (Include, but not limited to):** *Applicants must be able to speak, read, write and understand the English language. Given the communicative challenges many consumers face, it is imperative that this agency not impose additional potential barriers.* For those positions for which driving is an essential job function, you must have a vehicle while on-duty, a valid Ohio Driver's License with no more than 6 points on your driving record, and proof of automobile insurance. All applicants must be at least 18 years old, have no felony convictions, and possess a high school diploma or GED certificate. A personal, professional and criminal background check will be completed by Learning Never Ends, LLC.

Additionally, once an offer of employment is made, the applicant must successfully complete CPR and First Aid certification, and obtain a passing grade (80% or higher) of Delegated Nursing Instructional testing.

### **GENERAL INFORMATION**

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_ S.S.N: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How did you hear about our company? \_\_\_\_\_ If referral, who? \_\_\_\_\_

Position you are now applying for: \_\_\_\_\_

Are you at least 18 years old? ☐ Yes ☐ No

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Do you have a High School Diploma or GED? ☐ Yes ☐ No

Do you have a Driver License? ☐ Yes ☐ No

Do you have car insurance? ☐ Yes ☐ No

Are you currently employed? ☐ Yes ☐ No

If so, what is your schedule? \_\_\_\_\_

Have you served in the U.S Armed Forces? ☐ Yes ☐ No

Branch of Service: \_\_\_\_\_ Date Entered: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_

**Candidate Information: Please complete all sections of this page, do not leave any blank.**

Do you have a Social Security Card? **Yes No**

Do you have a High School Diploma/GED that you can provide a copy of? **Yes No**

Do you have a Valid Ohio Driver's License, with less than 6 points? **Yes No**

What is your Driver's License Number? \_\_\_\_\_

Do you have a personal vehicle to have on shift at all times? **Yes No**

Do you have personal automobile insurance you can provide a copy of? **Yes No**

Do you have any of the following Certifications?

CPR **Yes No** First Aid **Yes No** Medication Administration **Yes No**

Can you attend a one week, Monday through Friday 9a-5p training if you are selected for employment?  
**Yes No**

Do you have any pet considerations? (Circle all that apply) **Cats Dogs Rabbits Other**\_\_\_\_\_

Is there any reason you cannot work on Friday, Saturday, and Sunday?

**Yes No Other:** \_\_\_\_\_

If you are selected as a candidate for employment, do you have any dates you cannot work in the next 90 days? \_\_\_\_\_

Can you perform the following?

Twist, bend, and stoop to ensure the implementation of services: **Yes No**

Lift up to 25lbs without assistance: **Yes No**

Able to read, write and communicate clearly in the English Language: **Yes No**

### ***EMPLOYMENT HISTORY***

Company: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Position: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact this employer: ☐ Yes ☐ No

Reason for Leaving: \_\_\_\_\_ Duties: \_\_\_\_\_

Company: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Position: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact this employer: ☐ Yes ☐ No

Reason for Leaving: \_\_\_\_\_ Duties: \_\_\_\_\_

### ***PROFESSIONAL AND CHARACTER REFERENCES***

List references you have known for at least one year. Please DO NOT list relatives.

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Time Known: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Time Known: \_\_\_\_\_ Relationship: \_\_\_\_\_

Please explain how you feel people with disabilities should be treated and what qualities that you have that would benefit the individuals we serve.

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***I certify that all information provided on this application, for employment with Learning Never Ends, LLC, is true, correct and complete to the best of my knowledge.***

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## AVAILABILITY

I, \_\_\_\_\_, attest that I have the following availability to work. I understand that this availability will be used to determine a schedule for me if I am to be hired. I also understand I cannot change my availability for six months if I am hired.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Please list your availability below

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

**\*\*Below are our typical shift times**

**\*\* We also have shifts for as little as 4 hours and as most as 12 hours**

**\*\*Candidates with weekend availability are preferred**

**1<sup>ST</sup> SHIFT: 7AM-3PM, 8AM-4PM, OR 9AM-5PM**

**2<sup>ND</sup> SHIFT: 3PM-11PM OR 4PM-12PM**

**3<sup>RD</sup> SHIFT: 11PM-7AM OR 12AM-8AM**

***\*\*Please note some 3<sup>rd</sup> shifts are Onsite/On call and are paid at minimum wage***

I would like to work **Part-Time** or **Full-Time** (please circle one)

What is the maximum number of hours you prefer to work in a week? \_\_\_\_\_

Thank you for your interest in Learning Never Ends. We will review your application in a timely manner. Please note that candidates are selected based on availability amongst other factors. If you are to be selected for employment, we will contact you to schedule an interview outside of our recruitment day if necessary. Please do not contact us to discuss the status of your application.

Thank you

# Learning Never Ends LLC

## ***BACKGROUND RESEARCH RELEASE & AT-WILL ACKNOWLEDGEMENT***

Please read this section carefully and acknowledge your understanding by signing your name in the space below.

I, \_\_\_\_\_, certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge.

### **1. Consent to Conduct Background Investigation.**

As a condition of and in consideration for Learning Never Ends, LLC's consideration of this application, I give permission to Learning Never Ends, LLC to investigate my personal and employment history. I understand that this background investigation will include, but not limited to, verification of all information on this application, interviews with past employers, and submitting my name to the State of Ohio Nursing Aide Registry. I give permission to Learning Never Ends, LLC to conduct this investigation, and to discuss the results of this investigation in connection with my application of employment.

### **2. Consent to Contact Past Employers**

I give permission to Learning Never Ends, LLC to contact all employers listed on this application for references. I give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with Learning Never Ends, LLC consent to the release of such information orally or in writing, and hereby release them from all liability and agree not to sue them for defamation or other claims based upon any statements they make to any representative of Learning Never Ends, LLC. I waive all rights I may have under state law to receive a copy of any written statement provided by any of my former employers to Learning Never Ends, LLC. I agree to indemnify all past employers for any liability they may incur because of their reliance upon this release.

### **3. Consent to Contact Government Agencies**

I give permission to any agent, attorney or representative of Learning Never Ends, LLC to receive a copy of any information obtained in the file of any federal, state, or local court, governmental agency, law enforcement agency or investigator concerning or relating to me. I further consent to the release of such information and waive any right under state law concerning notification of the request for a release of such information. In the event a state law does not provide for prospective employers to have access to information, I hereby delegate Learning Never Ends, LLC as my agent for receipt of information. I understand that the scope of this investigation will be limited to criminal and/or civil records that relate to my honesty, integrity and/or abilities.

### **4. Cooperation with Investigation**

I agree to fully cooperate in Learning Never Ends, LLC background investigation, and to sign any waivers or releases that may be necessary to obtain access to relevant information. In the event that any former employer or federal, state, or local governmental agency will not release reference information or criminal history information directly to the employer, I agree to personally request such information to the extent of the law.

If I am employed, I agree that in consideration for my employment, I will conform to the policies and procedures of Learning Never Ends, LLC. I understand that those policies and procedures may be altered, amended or repealed by Learning Never Ends, LLC at any time, at their sole option and without any prior notice to employees.

I acknowledge that if I am employed, my employment is at will – meaning that it is for no definite period of time and can be terminated by me or the Company, with or without cause or notice, at any time. I also acknowledge that my compensation can be changed at any time, with or without cause or notice, at the option of Learning Never Ends, LLC. I understand that no representative of Learning Never Ends, LLC has any authority to enter into any agreement for employment for any specified period of time, to assure any benefits or terms and conditions of employment, or to make any agreement contrary to the foregoing, except an Administrator of Learning Never Ends, LLC, who may only do so in writing.

I understand that this Application is current for 60 days only. At the conclusion of this time, if I have not been hired by the Company and want to be considered for employment, I will have to complete a new application. I certify that the facts contained in this Application are true and complete to the best of my knowledge and I understand that, if I am employed, any statements I have falsified on this Application shall be grounds for immediate dismissal. I also understand that, if employed by the Learning Never Ends, LLC, I am required to abide by all Learning Never Ends, LLC rules and regulations.

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Applicant's Signature

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Date