



Candidate Information

Date:				
Candidate Name:				
Screener Name:				
Referral Source	<input type="checkbox"/> Job Site: _____	<input type="checkbox"/> Job Fair	<input type="checkbox"/> RC Employee: _____	<input type="checkbox"/> Other: _____

1. Why are you currently seeking employment and interested in Recover Care?

2. Do you have a current Nursing License in the state you are applying?

- Yes
- No

3. What is your experience working in the home care setting? Other setting?

4. In this role, you would work primarily with senior clients. What is your experience providing care for this population?

5. When are you most satisfied in a job? What motivates you?

6. What did you like least about your last job?

7. Why would you be a good fit for Recover Care?

This position may require you to be on-call for periods of time. Are you able to accommodate this as needed, if required? <input type="checkbox"/> Yes <input type="checkbox"/> No	What wage are you hoping to make? _____
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Phone Screen Outcome

<input type="checkbox"/> Candidate Proceeds to Interview: _____	<input type="checkbox"/> Pending Discussion with Manager	<input type="checkbox"/> Declined
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Additional Comments:

