



Meridian Developmental Services, LLC  
40 W Franklin, Suite I Meridian Idaho 83642  
208-888-8068 (Phone) 1-844-823-3053 (Fax)

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## Employment Application

### Personal Information:

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact/Relationship: \_\_\_\_\_

- Do you possess a current driver's license?     Yes     No
- Will you be willing to drive MDS company vehicles?     Yes     No
- A criminal history background check is required for employment at MDS. We will pay for the expense unless you leave employment prior to 4 months. Do you agree to allow MDS to withhold it from your last paycheck if you leave prior to 4 months?     Yes     No
- CPR and 1<sup>st</sup> Aide is required for employment at MDS. We will pay for the expense. If you leave our employment prior to 4 months, do you agree to allow MDS to withhold from your paycheck?      
Yes     No
- After reading the MDS job description do you agree that you are able to perform the required job tasks?     Yes     No

**Education:**

Name of the last school attended? \_\_\_\_\_

Last grade level completed? \_\_\_\_\_

**Other training and certifications?**

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**Volunteer history?**

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**Experience with individuals with disabilities or mental health diagnosis?**

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**References (name, relationship, and phone number)?**

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**Employment History:**

<b>Name and Address of Employer</b>	<b>Dates:</b>	<b>Job Description:</b>	<b>Hourly Wage:</b>	<b>Reason for Leaving:</b>