

YOU MUST HAVE YOUR OWN CAR (VAN OR TRUCK)

Your Name \_\_\_\_\_



PLEASE NOTICE PAGE 3 - THE CRIMINAL BACKGROUND CHECK

NEEDS TO BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC.

A CEAP STAFF MEMBER IS A NOTARY AND IS OFTEN AT THE OFFICE,

*From 9:30 AM UNTIL 2:30 PM MONDAY-FRIDAY.*

THERE ARE ALSO NOTARY PUBLICS AT BANKS, BUSINESSES, ETC

THANK YOU!

CEAP Chore Program  
6840 78<sup>th</sup> Avenue North  
Brooklyn Park, MN 55445

If you have any questions please call 763-450-3667 or 763-566-9600 and ask for the Chore Coordinator.

CEAP CHORE PROGRAM

Dear Applicant,

Thank you for your interest in the Chore Program. We have attached additional information about our program. Please complete the enclosed application and return it to CEAP. Included in the packet is a Criminal Background form that must be signed and notarized. There usually is a notary public at CEAP daily from 9:30 until 2:30 PM.

**Please list three references that are not family members and are not related to you.**

The background check takes approximately 2 weeks. When it is completed and we have the clients available. We will contact you to arrange an interview.

Sincerely,

The Chore Staff



Criminal Background Check  
**Informed Consent Form**  
Account #: 7634503660 Non-profit

**In order to promote safety of individuals and families receiving services from CEAP, we will request the Bureau of Criminal Apprehension (BCA) to perform a criminal background check on you.**

As a general guideline any person convicted of a felony or misdemeanor involving intentional physical force against another, intentional stealing or intentional damaging of property will not be hired on staff or accepted as a volunteer.

Minnesota statutes and the BCA require you to provide the following information in order to complete the background check:

Full Name of Applicant \_\_\_\_\_  
Last First Middle

Maiden Name \_\_\_\_\_ Previous Names \_\_\_\_\_

Address \_\_\_\_\_  
Street City/State Zip

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
Month/Day/Year

I authorize the Minnesota Bureau of Criminal Apprehension to disclose criminal history record information to CEAP for the purpose of employment/volunteer as:

\_\_\_\_\_ with this agency.

The expiration of this authorization shall be for a period no longer than one year from the date of my signature.

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Notary Public, Hennepin County  
State of Minnesota

**Chore Contractor Application**  
 6840 78<sup>th</sup> Ave. N.  
 Brooklyn Park, MN 55445  
 (763) 566-9600 Fax: (763) 566-9604

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

<u>Work Experience</u> Employer name, address, phone	Date Start	Date Left	Position Held	Job Duties

**References** List below persons 18 or older, not related to you who have known you for at least one year. List a daytime phone number for each. Professional references preferred i.e. Clergy, employer, co-worker, teacher, doctor Etc.

Name	Address	Relationship	Day Phone
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Emergency contact person if injured: Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

Have you ever been convicted of any crime? No \_\_\_\_\_ Yes \_\_\_\_\_ If yes, Date \_\_\_\_\_

Charge: \_\_\_\_\_ (A conviction doesn't automatically bar you from employment. It will be considered only as it relates to fitness to perform the job and client safety.)

Can you legally work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is cause for dismissal from the program. I hereby release CEAP and their staff from any liability connected with this service.

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

Parental permission for workers under 18: I hereby give my child permission to participate in the Senior Chores Program. I hereby release CEAP and their staff from any liability connected with this service.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

Name of School and grade student is currently in \_\_\_\_\_

Inventory of Skills – mark those you have experience with and are interested in doing

Snow Removal

- Remove Snow from roof with rake
- I have experience using snowblowers
- I have snowblower to transport

Lawn and Garden

- Shovel walks and driveways
- Mow lawns
- I have mower to transport
- My mower has a bagger
- Rake leaves
- Shrub trimming
- Gardening (prep soil, plant, weed, trim, etc.)

Painting

- I have experience with estimates
- Interior
- Exterior
- Wall paper

Plumbing

- Toilet repair
- Pipes
- Faucet repair

Installation

- Locks
- Handrails and grab bars

Minor repairs

Carpentry

Minor repairs

Please list any other skills:

\_\_\_\_\_

\_\_\_\_\_

Please circle areas you want: Brooklyn Center, Brooklyn Park, Camden, Champlin, Osseo, or All Areas.

Days available \_\_\_\_\_ Hours \_\_\_\_\_

Transportation (please circle) Car Truck Bus Parents Other \_\_\_\_\_

Driver's License Number \_\_\_\_\_

Tools and equipment available, like mower, ladder, tools, etc. (please list) \_\_\_\_\_

\_\_\_\_\_

Do you have physical limitations that restrict your work?  If yes, do you have ways to compensate, i.e. special tools or equipment? Please explain: \_\_\_\_\_

How did you hear about the Senior Chores Program? \_\_\_\_\_

**Fill in and sign for 2 most recent employers**

## CHORE PROGRAM

### RELEASE OF INFORMATION

I, \_\_\_\_\_ hereby grant permission to

\_\_\_\_\_ to release information to Community Emergency Assistance Programs, Inc. concerning my job performance, attendance, reliability and appropriateness to provide chore services to seniors and adults with disabilities. In signing below I agree to hold CEAP, Inc., former employers and person listed as references harmless for any exchange of information or outcome pertaining to my employment as a Chores Worker. This release is effective for one year from the date signed below.

Applicant

Date

## CHORE PROGRAM

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Applicant

Date

- The Chore Coordinator locates individuals from the community to provide services such as housekeeping, lawn care, snow removal and light maintenance. All work is dependent on worker availability.
- CEAP does a criminal background and reference checks on all Chore workers.
- When a client calls in for a service, the coordinator or assistant attempts to assign a Chore worker to provide the service.
- The current rate for service is \$15 an hour with a one-hour minimum per job.
- The Chores Contractor goes to the client's home to do the job. Chore Contractors are to be paid by the client when each job is completed. A job sheet needs to be filled out and turned in to CEAP. It is important that the client initial the job sheet every time work is done. All job sheets need to be turned in by the 1<sup>st</sup> or 2<sup>nd</sup> day of the following month.
- Pre-paying is not allowed with the Chores program. Arrangements for alternative payment methods may be made subject to the approval of the Chores worker.
- All jobs need to be cleared and pre-approved by the Chores Coordinator.
- The Chore Contractor can turn down any job they feel they will be unable to do.
- If there are any disagreements between the contractor and the client, please notify the coordinator.
- Community Emergency Assistance Program (CEAP), Minnesota Area Agency on Aging (MAAA) does not assume any liability or responsibility from the client's participation in the Chores program. The client also recognizes and understands that the worker providing services is an independent contractor, and is not an employee or agent of CEAP.

**If you have any questions or concerns please call 763-450-3667 or**

**CEAP at 763-566-9600**



**CEAP  
Independent  
Contractor  
AGREEMENT**

**DIVERSITY AND COMMITMENT**

CEAP is committed to joining with others to find constructive ways to eliminate racism, inequality, poverty, and alienation in our organization and the community in which we serve.

The above statement reflects CEAP’s policy on respectfulness of all others in all agency dealings. This is a central value in CEAP’s mission as an agency. While acting as an independent contractor with CEAP, you will be respectful of all others equally, whether they be staff, volunteers, or clients.

Violation of this agreement will result in verbal and written notice upon first occurrence, and termination as an independent contractor upon any subsequent occurrence.

**CONFIDENTIALITY**

You will not disclose any information relating to confidentiality and data privacy obtained from your participation in the Program, in accordance with the Minnesota Government Data Practices Act (Minnesota Statute Chapter 13).

Failure to comply with this statute will result in immediate suspension or termination of your status as an independent contractor with CEAP, and possible prosecution according to the penalties defined by law.

**EQUAL EMPLOYMENT OPPORTUNITY / AFFIRMATIVE ACTION**

CEAP is committed to the principals of Equal Employment Opportunity and Affirmative Action. We believe our continued success depends on the full and effective utilization of qualified persons without regard to race, color, religion, nation of origin, gender, age, handicap, or any other classification protected by federal, state, or local laws or ordinances.

Every Independent Contractor, is expected to comply with the spirit and the intent of our Equal Employment Opportunity / Affirmative Action policy.

**HARASSMENT**

We believe that every staff person, independent contractor with CEAP and individuals we serve, are entitled to be free of verbal, physical, or other harassment because of race, color, religion, gender, nation of origin, age, handicap, or any basis protected by federal, state, or local laws or ordinances.

We expect full cooperation of everyone at CEAP in making this policy effective. All situations which could be perceived as harassment must be avoided. The kinds of conduct governed by this policy include, but are not limited to, verbal abuse (such as offensive racial, ethnic, or sexual “jokes”) and unwanted physical contact. Any incident of harassment should be reported to your supervisor, the Senior Services Coordinator, or Senior Chores Assistant.

I have read and understand the above policies and agree to them while engaged in any activities at CEAP.  
I agree to observe all applicable statutes, rules, and policies relating to CEAP.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature          Date

\_\_\_\_\_

\_\_\_\_\_  
Authorized CEAP Personnel          Date

\_\_\_\_\_

# Chore Contractor Procedures and Responsibilities

1. When given a job by the Chore Service, please call that client as soon as possible. If you cannot contact them within one or two days please call The Senior Chore Services Coordinator. When contacting any senior, identify yourself clearly as a CEAP Senior Chore Contractor. Also make a point of contacting the senior at a reasonable hour. A call late in the evening can be quite upsetting to some people.
2. Report to the job on time. If you must cancel for any reason it is your responsibility to reschedule the appointment with the senior and notify them of the change the same day.
3. Review with the customer what work needs to be done and what supplies are needed.
4. When the job is completed, fill in your worksheet. By the 1<sup>st</sup> or 2<sup>nd</sup> day of the following month, turn in your completed timesheet to the CEAP office. Please record any social time spent with the client. This is unpaid time but it needs to be entered on the time sheets under social time. This is important for Chore Services continued funding.
5. Since you are an independent worker, it is your responsibility to keep track of your income for tax purposes. You will not fill out a W-4 form and there is no Workers Compensation insurance provided.
6. Do not under any circumstance request or accept a loan or gift of money or material things from any senior or their family. Also, do not request refreshments other than water from a senior while on the job. You may accept refreshment from a senior if they offer it. Any acceptance of money or gifts is grounds for termination from the Chore Program.
7. Do not make a point of discussing religious beliefs with any senior. Trying to convert a senior to another religion is grounds for termination.
8. Do not under any circumstances provide personal care, mobility assistance or food preparation. Do not provide any financial assistance to the client.
9. Do not refer friends or other workers to do work for a senior. All workers must be screened through our application process before they can be assigned chore jobs. Do not take additional workers to a job who have not been approved by CEAP.
10. It is the Chore Contractor's responsibility to notify the Chore Coordinator at least two weeks prior to resigning from the program. At that time, turn in a list of all clients you serve. You must notify your clients of your resignation.
11. If either you or the client has any questions call the Chore Coordinator at the CEAP office 763-566-9600 or directly at 763-450-3667.

I understand that if I fail to follow any of the above procedures, CEAP will remove me from the Chore Program

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

I, \_\_\_\_\_, agree to the responsibilities of an Independent contractor with the Community Emergency Assistance Program (CEAP). My role as an Independent Contractor with CEAP is to provide chore home maintenance services to senior citizens and disabled persons. The Chore Coordinator will be assigning clients to me. As an Independent Contractor it is my responsibility to determine with the client the times when I will provide the services.

Each “job” will be a minimum of one hour. The current rate is \$15.00 per hour for each “job” performed.

All maintenance and or repair “jobs” must be coordinated through the Chore Coordinator. I understand that it will be my responsibility to file the appropriate forms with the Federal Government and the State of Minnesota. I also understand that any type of Workmen’s Compensation will be my responsibility.

I, the Independent contractor, will hold CEAP, harmless against any and all claims, expenses, losses, damages, or lawsuits for damages, arising from or related to performing or failing to perform activities under this agreement.

Mileage expenses are the responsibility of the Independent Contractor.

I understand that I will turn in my job sheets into the Chore Coordinator on or before the 1<sup>st</sup> or 2<sup>nd</sup> day of the month.

\_\_\_\_\_  
Independent Contractor

\_\_\_\_\_  
Chore Coordinator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian if applicant is under