

# Therapeutic Communities

Thank you for your interest in employment with Therapeutic Communities, LLC. Our living program is called LiveOak Living Community. We provide an upward staff level system that allows employees to progress within the organization. With exceptional work performance, employees have opportunities for increased responsibilities, promotions, and higher wages. Benefits for full-time employees include flexible scheduling, paid time off, health insurance, regular performance evaluations, direct deposit for paychecks, and opportunities to pursue interests and hobbies that are appropriate for our residents.

Applicants must pass the following in order to meet our basic eligibility requirements for employment:

- Comprehensive criminal background check
- Driving history background check, and be insurable as a driver with our company
- Misconduct registry check
- Pre-Employment Drug screen
- All applicants must complete a pre-employment checklist and demonstrate the responsibility and competency to perform assigned job duties during an initial 60 day orientation period. After successfully completing these requirements and subsequent evaluation, the applicant will be considered for regular employment.

Attached you will find our application and consent forms. Please take time to accurately complete and sign the forms and return by email to [AC@liveoakliving.com](mailto:AC@liveoakliving.com), or mail to: PO Box 705, San Marcos, TX 78667. You may also fax the form to 512-357-4025. You may also include a resume, but it does not take place of a completed application packet.

If you have not heard from us in a timely manner, please feel free to contact us at 512-357-4023 or email Angelica Carballo at [AC@liveoakliving.com](mailto:AC@liveoakliving.com).

Sincerely,

Angelica Carballo  
Director of Operations

*Please note that Texas is an Employment at Will state and employment with Therapeutic Communities, LLC should not be construed as a contract, or guarantee of permanent or part-time employment.*

# Therapeutic Communities, LLC

## Employment Application

*Therapeutic Communities, LLC (the "Company") is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.*

<b>Personal</b>			
Last Name	First Name	Middle I.	Social Security #
Address		Salary Requirements: \$ _____ per hour / \$ _____ per year	
City	Zip	Driver's License #	
Email		Phone#	
What days/hours will you be available?		If hired, can you work <input type="checkbox"/> Full time <input type="checkbox"/> Part Time	
Do you have any relatives employed by the company?	Have you ever been convicted of a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Education</b>					
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Circle Highest Grade Completed:	High School	9	10	11	12
	College, Trade or Business	1	2	3	4
	Graduate Studies				

School	Address	Major Studies	Degree, Diploma, License or Certificate
High School			
College/University			
Vocational, Business, Graduate, Other			

List any relevant certifications or professional designations

Other special knowledge, skills, or qualifications:

# Employment History

Please list your last four (4) positions of employment, starting with the most recent position. All information **must** be completed. You may attach a resume, but not in place of completing the required information.

Start Date	Employer Name and Address	Supervisor Name	Starting/Ending Salary
End Date	Job Title	Supervisor Phone #	Reason for leaving
Duties & Responsibilities:			
Start Date	Employer Name and Address	Supervisor Name	Starting/Ending Salary
End Date	Job Title	Supervisor Phone #	Reason for leaving
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Start Date	Employer Name and Address	Supervisor Name	Starting/Ending Salary
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Duties & Responsibilities:			
Start Date	Employer Name and Address	Supervisor Name	Starting/Ending Salary
End Date	Job Title	Supervisor Phone #	Reason for leaving
Duties & Responsibilities:			

## General

Yes No

- May we contact your current employer for references?
- If hired, will you be able to work overtime?
- Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation?
- Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by court? (A yes response does not automatically disqualify your application.)

## Certification and Authorization

The above information is true and correct. I understand that, in the event of my employment by the Company, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize the Company to inquire into my educational, professional, and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I further authorize the Company to obtain any credit and/or consumer check.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the Company is intended to create an employment contract between myself and the Company under which my employment could be terminated only for cause. On the contrary I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Company at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If hired, I will be required to provide original document which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

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Applicant Signature

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Date

**APPLICANT DISCLOSURE**

Pursuant to the requirements of the Fair Credit Reporting Act, notice is given that a consumer report may be made in connection with your application for employment.

If you are denied employment, either wholly or partly, because of information contained in a consumer report, a disclosure will be made to you of the name and address of the consumer-reporting agency making such report. You will also receive a copy of the report and a statement of your consumer rights.

I have read the above notice and understand what it means. I hereby authorize the procurement of a consumer report for employment purposes.

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Printed name (exactly as it appears on your Social Security card)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**EMPLOYEE MISCONDUCT REGISTRY – RULES AND REGULATIONS**

**ACKNOWLEDGEMENT**

- I understand that if I am listed on the Employee Misconduct or the Nurse Aid Registry, I may not be employed by Therapeutic Communities, LLC's assisted living facilities.
- A copy of the Employee Misconduct Registry (EMR) Rules and Regulations, Title 40, Texas Administrative Code, Chapter 93, issued by the Texas Department of Aging and Disability Services, and Chapter 253, Texas Health and Safety Code, Employee Misconduct Registry is available to me upon request.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date