



PCA NORTH
A Program of Arc Northland

424 W Superior St, #201, Duluth, MN 55802 ■ Phone: 218-726-4724 or 800-317-6475
 Fax: 218-726-4732 ■ e-mail: jkempfert@arcnorthland.org

PROVIDER APPLICATION

Date _____

Name: _____
 Last First Middle Initial

Are you 18 or older? Yes No

Address: _____
 Street/Route City State Zip Code

Phone: Home: _____ Work: _____ Social Security #: _____

Residence for Past Five Years (most recent first):

Address _____ City _____ State _____ Dates _____

Address _____ City _____ State _____ Dates _____

Address _____ City _____ State _____ Dates _____

Please provide any other names by which you have been known (i.e. Full maiden name, etc.)

- 1. _____ 2. _____
- 3. _____ 4. _____

EMPLOYMENT HISTORY

List your employment for past five years, most current occupation first:

1) Dates (mo/yr) _____ to _____ Company _____

City, State _____ Supervisor's Name _____ Title _____

Your Position _____ Brief Description of Primary Duties _____

Reason for Leaving _____

Rate of Pay at Termination _____

2) Dates (mo/yr) _____ to _____ Company _____

City, State _____ Supervisor's Name _____ Title _____

Your Position _____ Brief Description of Primary Duties _____

Reason for Leaving _____

Rate of Pay at Termination _____

3) Dates (mo/yr) _____ to _____ Company _____
City, State _____ Supervisor's Name _____ Title _____
Your Position _____ Brief Description of Primary Duties _____

Reason for Leaving _____

Rate of pay at termination _____

(Attach additional page or a resume as supplemental information)

EDUCATION

List all education beyond junior high school

School/Location (State)	Degree/Diploma/Certificate	Year	Major Subject(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Community: List any civic, professional, trade, etc. groups to which you belong, and volunteer experience: (optional)

Hobbies/Leisure Time Activities: (optional)

BACKGROUND INFORMATION

Have you ever been convicted (as an adult) of a serious crime? No Yes
If yes, charge(s) and date(s) _____

How did you learn of the Arc Northland's PCA North program? _____

Are you currently licensed in any capacity to care for children? No Yes
If so, what kind of license and through what agency? _____

Have you ever been licensed in any capacity to care for children? No Yes
If so, what kind of license _____

State in which you were licensed _____

Agency _____ City _____

How long were you licensed? _____

Have you ever had a license revoked or not renewed? No Yes
If so, provide circumstances and dates _____

Have you worked professionally with children other than your own? No Yes
If so, list dates, community, state, agency and capacity _____

REFERENCES

Please list name, address and phone number of three non-related references who know you well enough to comment on your ability to work with children or adults with disabilities.

- 1. Name _____
Address _____
Affiliation/Years Known _____ Phone _____
- 2. Name _____
Address _____
Affiliation/Years Known _____ Phone _____
- 3. Name _____
Address _____
Affiliation/Years Known _____ Phone _____

I certify that all the above information is true to the best of my knowledge and understand that providing false information on this application can be grounds for immediate dismissal.

Name _____ Date _____

I give Arc Northland permission to contact references, former employers, the state of Minnesota (for a criminal background check) and others to verify that the information I have provided is correct and complete.

Name _____ Date _____

I understand that, if I am hired by Arc Northland, I would be an at-will employee. This means that Arc Northland and I would each have the right to terminate the employment relationship at any time, with or without cause.

Name _____ Date _____

(Please use the other side of this page to provide additional explanation/information you would like us to have.)

Thank you for your interest in becoming a PCA and taking time to complete this application. If you have a resume, please attach it to the application. If you have any questions, please call the office at (218) 726-4725. Please mail all documents to our office at your earliest convenience.

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