## **EMPLOYEE RESPONSIBILITY TO THE ORGANIZATION:**

Please be sure to read the following statements carefully and sign this form.

I certify that all the information I have provided to Clarity Care, Inc. is true and complete to the best of my knowledge. I understand that omitting requested information or giving false information, in my interview(s) or in the process of my pre-employment evaluation may result in rejection of my application/resume, withdrawal of a job offer, or termination, if I am offered a job.

I authorize investigation of all statements during the hiring process as may be necessary in arriving at an employment decision, including a police/criminal record check from the Wisconsin Department of Justice or any other appropriate Agency(s). I hereby release from liability the employer(s) and its representatives for seeking and furnishing such information.

I understand that if offered a job, I may be required to:

- Undergo a physical health exam and communicable disease screening by a
  physician designated by Clarity Care, Inc., which may affect decisions whether I
  can do the essential functions of the job;
- 2. Undergo and pass a criminal record, driving record, and reference checks;
- 3. And, after placement, complete and receive certification in any and all employee training required by Clarity Care, Inc. I understand this training must be within the first 90 days of employment and is a condition for continued employment.

I understand that Clarity Care, Inc. is an equal opportunity employer. The employer does not discriminate in employment and no part of the hiring process is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by local, state, or federal law.

I understand that employment with Clarity Care, Inc. is "at will," and that no guarantee of a job exists. If employed, I may terminate my employment at any time for any reason, and the company may terminate my employment at any time for any reason not contrary to law.

Employee Signature	
Date	