



STATEMENT OF CONDUCT

- 1. There is no credible evidence that I, _____,
Applicant Name (Please print)
have abused, neglected, sexually assaulted, exploited or deprived any person, nor is there any credible evidence that I have subjected any person to serious injury as a result of my intentional or negligent misconduct.
2. I HAVE/HAVE NOT been exposed to the following: Tuberculosis (TB) and/or Hepatitis.
(Please circle one)
3. If you HAVE been exposed to either or both, please answer:

Tuberculosis (TB): ___ Yes ___ No Date of exposure: _____
Hepatitis: ___ Yes ___ No Date of exposure: _____

If I am ever exposed to Tuberculosis (TB) and/or Hepatitis during the course of my employment with W.C. Creations, inc. (d/b/a an independently owned Home Instead Senior Care franchise), I understand that it is my obligation to report it to the Home Instead Senior Care franchise office immediately.

- 4. My most recent TB test was taken on: _____
5. The results of the TB test were: _____
6. I understand that positive TB readings must be accompanied by chest x-rays taken within the past 6 months and that it is my responsibility to provide such documentation to Home Instead Senior Care. To my knowledge, I HAVE/HAVE NOT experienced any TB symptoms.
(Please circle one)

(Applicant Signature) (Date)

(HISC Representative) (Date)