



B.I.S., LLC  
Kim (Berly) Forsythe  
Human Resources Director  
10176 Corporate Square Dr  
Ste 220  
Creve Coeur MO 63132  
(314) 395-9375 x 102  
(314) 395-9382 fax  
[kforsythe@behaviorinterventionservices.com](mailto:kforsythe@behaviorinterventionservices.com)

Hello!

Thank you for your interest in Behavior Intervention Services.

The position you are applying for is for a **Personal Care Assistant**. As a PCA, you would provide in home care to children and adults with developmental disabilities. Clients have a specific behavior plan written for their needs and goals. Part of a PCA's focus is to implement or carry out the behavior plan as well as perform accurate documentation of behaviors, skill sets and activities achieved. Our clients vary in ages and locations so we try to pair our employees with clients in the areas they rank as preferential as well as skill and experience level needed for those clients. We are currently seeking applicants that exhibit the patience and willingness to work with aggressive behaviors. Compassion and experience in this area is a plus.

Some programs in a typical behavior plan would focus on self-help and hygiene skills, control of challenging behaviors and communication skills (use of sign language, speech or picture identification - whatever fits best into the clients skill set.) Since each client has a behavior plan tailored to their current ability levels and needs, other more advance programs may be included as well.

Each client has a team of PCA's headed by a Behavior Therapist that work to implement the program, take daily data and discuss any issues pertaining to the client during team meetings. Typically, a part time PCA will have 1-3 clients that they work with on a weekly basis. A full time PCA might have as many as 3-5 clients that they work with weekly, depending on schedule and availability.

Shift times depend on the clients funding and current need for that client. Many clients need after school and weekend help. We can accommodate most availability but for those interested in full time hours, an applicant would typically need to have some evenings and weekends available.

The following items are required trainings and interested applicants would be required to attend up to 5 days of training prior to beginning work with any client: Registry with the Family Care Safety Registry at [www.health.mo.gov/FCSR](http://www.health.mo.gov/FCSR), MO driver's Class E license, reliable transportation and ability to transport, company orientation, Abuse and Neglect Training, Blood Borne Pathogen training, Seizure training, Mandt Systems Relational and Physical skills certification, CPR/First Aid certification and a passing grade in Behavior Management classes 1-4.

Completed applications should be faxed to 314-395-9382, emailed to [kforsythe@behaviorinterventionservices.com](mailto:kforsythe@behaviorinterventionservices.com) or you may fill out an online application at <http://behaviorinterventionservices.com/employment/>.

If your application meets our current needs, we will contact you to set up an initial interview. We hire on a part time basis initially and may be able to offer full time after a 90-day probationary working period. Part time employees must be able to work at least 10 hours per week. Applicants interested in full time must be able to work a minimum of 40 hours a week, have weekend and evening availability and have a supervisor's recommendation for the position.

Please contact me should you have any questions. I look forward to speaking with you soon!

Sincerely,

A handwritten signature in black ink, appearing to read "Kim (Berly) Forsythe".

## Information Sheet

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: (Please indicate the best way to reach you)

Home \_\_\_\_\_

Cell \_\_\_\_\_

Other \_\_\_\_\_

Date available to work: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ State applicant born in: \_\_\_\_\_

Required Certifications:

CPR exp: \_\_\_\_\_

First Aid exp: \_\_\_\_\_

Discreet Trial: \_\_\_\_\_

Seizure training: \_\_\_\_\_

Mandt training: \_\_\_\_\_

Medication Aide: \_\_\_\_\_

FCSR registration #: \_\_\_\_\_

I understand that any certifications I list will need verification by BIS. I must provide an adequate copy of the certification in order for it to transfer to my records. Any training not currently held must be completed prior to my start with any client. Failure to carry the required certifications will relinquish my position with BIS.

**Availability: (only write in the times that you are AVAILABLE and WILLING to work)**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Seeking: Part time    Full time (circle one)    How did you hear about us? \_\_\_\_\_

**Rank preference for location: (1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> choice, etc)**

Jefferson County \_\_\_\_\_    St Charles County \_\_\_\_\_    West St Louis County \_\_\_\_\_

North County \_\_\_\_\_    South County \_\_\_\_\_    Illinois \_\_\_\_\_    St Louis City \_\_\_\_\_

Other (ie, do you attend school or have another job that you wish to stay close to?) \_\_\_\_\_

**Office Use only:** Initial interview: \_\_\_\_\_ 2<sup>nd</sup> phone interview: \_\_\_\_\_

Referred by: \_\_\_\_\_ Disqualified?: \_\_\_\_\_

Training week scheduled: Orientation \_\_\_\_ Mandt \_\_\_\_ CPR/FA \_\_\_\_ Bx Mgt 1 & 2 \_\_\_\_

Hire Date for First Steps: \_\_\_\_\_ Hire Date for TriCare: \_\_\_\_\_

Date registered for Module I: \_\_\_\_\_ Date Module I taken: \_\_\_\_\_

# Behavior Intervention Services

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Position Applied for: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If so, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES NO If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_

### References

*Please list at least two professional references. Failure to provide professional references will disqualify your application.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

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