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Shorehaven
BEHAVIORAL HEALTH, Inc.

In-Home Second Psychotherapist
or Case Manager

Frequently Asked Questions

Revised 6/20/2011



We've been asked certain questions repeatedly about this job and want to explain certain key points about our In-Home Second Psychotherapist or Case Manager position. So we have collated these questions for you. If you have others, please email us at the contact addresses below.

Note: First let us clarify that an In-Home Second Psychotherapist or Case Manager is one job. The type of case will determine if the person in this position is functioning as a therapist or a combined case manager and therapist. We encourage the professionals in this position to have a mix of cases, some of each type. This will expose them to more consultation services at Shorehaven, a wider range of cases, varied responsibilities, and more complete preparation for a future role as a Licensed Psychotherapist, for the heightened responsibility and judgment of that role.

Also note, this position comes with intensive supervision to qualify the applicant for licensure and to move up to a Lead Psychotherapist position. We want therapists in this job to achieve the training license as rapidly as possible and to work towards licensure.

This position is a terrific learning opportunity – working with an array of individuals and families, a variety of problems; learning to manage practice and documentation and billing; and learning to be a licensed professional.

The therapist is expected to foster a reputation for excellence, responsiveness, conscientious care, and careful and timely reports and paperwork, and to maintain a personable and professional manner at all times.

The requirements for this job are set by state law and Medicaid and HMO rules. The requirements are not flexible. If you do not meet the requirements, please refrain from applying. If you are not sure, send your resume and an explanation of your experience so we can evaluate your credentials.

ABOUT SHOREHAVEN

What is Shorehaven's reputation and mission?

Shorehaven Behavioral Health, Inc. [SBH] (www.shorehavenbhi.com) is a full service mental health and substance abuse clinic licensed in Wisconsin to provide outpatient psychotherapy, outpatient AODA treatment, and AODA day treatment. We have a main office at 3900 W. Brown Deer Road, Brown Deer, WI 53209 and a satellite office in Greenfield. We also provide in-home services throughout southeastern Wisconsin from Green Bay on the north, down to the Illinois state line on the south, and from Madison on the west to Lake Michigan on the east. We are often told we have a 'stellar' reputation because of our experienced staff, rapid accessibility, and breadth of programming.

We have won a Future Fifty designation both in 2010-11 and 2011-12 from the Metropolitan Milwaukee Association of Commerce. This award is given to companies with a record of sustained growth in revenues and employment.

How long has Shorehaven been operating?

The In-Home program started in 1995 and has been under the management of its current President since 1996 and Executive Director since 1999. The current Director of In-Home Services has managed the program since 2005. We have grown since 1996 from a small clinic with two full time clinicians and a handful of part timers to a team of over 110 employees. This is a testament to the effectiveness and quality of what we have to offer. The stability of our management team is another reason for our rapid growth and excellent reputation.

What services does Shorehaven provide?

Including the predecessors to SBH, we've provided Mental Health Services since 1973.

- Adult Psychotherapy
- Child & Adolescent Therapy
- Crisis Psychotherapy
- Drug and Alcohol Treatment
- Family Therapy
- In-Home Case Management
- Intensive In-Home Therapy
- Marriage Counseling
- Psychiatry and Medication Management
- Psychological Assessment

We are one of the largest Child and Adolescent outpatient clinics and In-Home treatment providers in Wisconsin. Shorehaven's hallmark is *providing therapy mostly by licensed or certified, highly trained, experienced clinicians.*

The Shorehaven Philosophy

- provide State-of-the-Art, research-based, accessible treatment services.
- maintain a highly experienced, trained staff.
- provide a full range of mental health and substance abuse services.
- offer *Short-Term help for Long-Term results.*

- make services convenient: 2 locations, evening hours, handicapped accessibility.

*The right treatment, based upon the right assessment, delivered at the right time
by the right people every time.*

IN-HOME PROGRAM

Why is in-home an excellent treatment modality?

We are very proud to offer the in-home program, which is essentially an enlightened and progressive effort to help children and adolescents at risk by targeting an array of important goals and dynamics in the life of the child and his or her family. The program is effective because it brings effective help into the child's *ecosystem* -- family, school, and community -- for *more lasting change*

When we are asked to do Case Management, the Second Therapist functions as a Case Manager, using therapeutic skills to help assess the family's needs for concrete and social services, educational services, governmental programs, medical services, psychiatry, and other services, and making the connections, while also providing some therapeutic intervention.

What is the structure of the In-Home Program?

Our in-home program is structured around the funding sources.

1. Medicaid - The Medicaid program is our SED (Seriously Emotional Disturbed) psychotherapy program for youth.
2. OptumHealth and other HMOs - This is a long-term case management program.
3. Milwaukee Wraparound, Family Care, BMCW - these are county funding sources for various services, in-home among them.

The program is uniquely designed for each family: In our SED program (Seriously Emotional Disturbed), a team of 2 mental health professionals gives up to 36 total in-home treatment hours to each family per month. *We develop a comprehensive plan based upon the child's needs, individualized for the family.* Services are provided for up to 15 months, as needed.

In our UBH program (United Behavioral Health), children and adults at risk for hospitalization and other intensive care receive therapy and case management up to 40 hours per month from a 2-person team or case management only for up to 20 hours per month.

The program follows a service plan: The plan may involve concurrent day treatment, outpatient, or psychiatric services, and long-term outpatient follow-up. *The plan always coordinates with services such as psychiatry, pediatrics, and schools.*

The program is Intensive: 4-8 hours per week, on average, in 2-5 weekly visits to the family, divided between two therapists (Lead and Second) or a therapist and case manager.

The Program is In-Home: Treatment is provided in-home, helping to ensure participation and help for the whole family.

Child and Family Therapy: The child or adolescent receives psychotherapy and behavior therapy while the family receives help for parenting, for managing the child's problems, and for emotional problems the parents may be experiencing. Conditions which maintain problems are target for family systems therapy. In our OptumHealth program, we also serve adults.

Note on Adult Therapy: The UBH program allows for in-home treatment of selected adults and also for AODA case management in-home.

What are the goals of the program?

Advantages and Goals of In-Home

This program has important advantages over other services, which should make In-Home either a first choice for many families or a follow-up to more intensive treatment (RTC, inpatient, day treatment).

We *team effectively* with local Child Day Treatment, Child Psychiatry, Inpatient, Child Welfare, and school programs

In-Home helps with *participation* of the child/adolescent and the family since services are brought to the home.

The program offers *comprehensive, long-term, multi-systems* treatment

By intervening in troubling family problems, we work to try to *prevent of out-of-home* placement and reduce risk for future emotional problems.

In-Home focuses on both *crisis management & lasting change*, targeting changes across a wide range of problems, including behavioral, psychiatric, academic, interpersonal, peer, and family problems.

In-Home brings change into the child's or adult's eco-system of family, school, and community systems for more lasting changes.

What therapy will the therapist be expected to do?

The Treatments used in the program include Psychotherapy, quite a bit of Behavior Management, Behavior Therapy, Cognitive Behavioral Therapy, Social Skills Training, Systemic Family Therapy, Anger Management, Specialized Treatment for anxiety, depression, severe emotional disorders (e.g., desensitization). We employ art therapists as well. We do not micromanage or oversee the therapy you do, but you will report to our supervisors and consultants, who will make clinical recommendations.

The Lead Therapist on SED cases or the Family Therapist on the UBH cases provides the guidance and treatment plan, supervises the work of the Second Therapist in the SED cases, and procures authorizations. On the UBH cases, the Second is always a Case Manager, procuring authorizations and getting supervision from our staff consultants.

How large is the program?

Shorehaven employs some 80-90 Therapists at any one time. About 3/4 of these are full time.

What population would a therapist in this position serve?

The in-home part of the job is treating children 4-20, all with psychiatric diagnoses, and their families.

Office outpatient treatment is for any age and problem type. We serve any children without discrimination.

We do give staff discretion to select cases more geographically homogeneous and to screen the safety of every situation. We also treat selected adults who have been inpatient or are at risk of going for inpatient care.

Where do the cases come from?

Many of the children are in foster care and come from protective service agencies. Many are referred from Day Treatment, Inpatient, and Residential Treatment Centers. Some are referred by schools. Some are referred by Child Psychiatrists. Others come directly from an HMO.

Who is eligible?

There are essentially 5 standards for the SED program.

1. Ages 4-20 and funded by Medicaid (Title 19), Wraparound, Safety Services, or On-going
2. Severe emotional problems, such as Post-Traumatic Stress Disorder, Panic Disorder, Pervasive Developmental Disorder, Separation Anxiety, Depression, Bipolar, AD/HD, Oppositional Defiant,

Reactive Attachment, etc.

3. The youth is also showing signs of related adjustment problems in family relationships, peer relations, school functioning, self care, or impulse control, suicidal thoughts, frequent or severe aggressive behavior, or a psychotic episode.

4. The youth has problems despite receiving some previous services, such as special education, psychiatric hospital, outpatient mental health clinic, day treatment, probation, social services, child protective services, residential treatment.

5. The family is ready for intensive intervention in the home by 1 or 2 therapists for 4 to 8 hours per week, *ready and able to work towards treatment goals, following through on meetings, and working together over the long haul.*

The UBH program is for children and adults who have been to inpatient or in day treatment or are at risk. The criteria are that the person has Medicaid through the UBH HMO. The decision about eligibility for Case Management is made by UBH gatekeepers.

How is the program funded?

Most cases are covered by Medicaid or a Medicaid HMO. Some come from Milwaukee Wraparound and some are funded by protective services.

Where are in-home services performed in southeastern Wisconsin?

We presently have teams in Brown, Dane, Green, Kenosha, Milwaukee, Outagamie, Ozaukee, Racine, Rock, Sheboygan, Walworth, Washington, Waukesha, Winnebago counties and the surrounding areas.

SECOND PSYCHOTHERAPIST/CASE MANAGER

What are the qualifications to be a Second?

In addition to personality, recommendations, an interview, and basic skills, we will look at two items: what type of degree do you have and past experience working with children. The degrees which are eligible for this position are any mental health related degree. We will accept MSW, MEd with counseling courses, counseling degrees, psychology degrees (MA, MS, PhD, PsyD) and others, depending upon experience. Art Therapists are also welcome to apply. We have had PhDs working on the in-home program in order to get licensure and we have licensed PhDs who continue in the in home program because of the excellent learning opportunities, the challenges of the work, and the good pay.

Experience with Children. *This requirement is set by Medicaid and is inflexible. The Second Therapist must have worked in a setting in which he or she provided psychological treatment to children who had mental health or behavioral diagnoses.* If the applicant has a Bachelors degree, the experience requirement is 2000 hours. If the applicant has a Masters degree, the experience requirement is 1000 hours. We will usually not interview applicants who do not have experience working with children who have mental health diagnoses.

Do I need previous In-Home experience?

No previous in-home experience is required. In-Home is quite different from Outpatient. The applicant should have some idea about what this work is like and should have experience working with children who have mental health needs. Because of our use of more experienced staff for this program, we do require that the applicant has worked with children who have emotional and psychiatric problems. *There is a great deal of experience and knowledge to be acquired about family systems, intervening in families, medications, AODA screening, diagnosing and assessing children, and related topics.*

What are the duties of the position?

1. Assessment. In the UBH program, the Case Manager assesses the child and family to determine if they meet the criteria for our program and what the diagnoses and needs are. Skills for doing a comprehensive assessment are essential, including the ability to screen for substance use disorders.
2. Prior Authorization. Procure the documents needed to obtain authorization. This task falls to the Lead on SED cases and the Case Manager on UBH cases.
3. The Second provides psychotherapy in accordance with the treatment plan.
4. The Lead supervises the Second Therapist according to the treatment plan. In the UBH program, the supervision is provided by Shorehaven supervisors.
5. Treatment is collaborative with psychiatrist, case manager, family, school, and others in the child's life.
6. The Lead follows up with the Consulting Psychiatrist and Consulting Psychologist on SED cases. The Second is welcome to attend and may be required by the Lead to attend. On UBH cases, the Case Manager follows up with the program Consultant monthly and with the licensure supervisor.
7. The Second Therapist or Case Manager documents all contract regarding the case. In the SED program, the Second's paperwork goes to the Lead for co-signing. The Second/Case Manager supplies billing logs to the office.
8. The Leads and Seconds provide for orderly termination of cases.
9. While making contact in the community, the Second/Case Manager is Shorehaven's representative, the face of the company. As such, we expect the professional to represent all of our programs with the highest level of professionalism and to help develop and nominate potential referral resources.

The therapist is expected to foster a reputation for excellence, responsiveness, conscientious care, and careful and timely reports and paperwork, and to maintain a personable and professional manner at all times.

The state bulletin which governs the Medicaid procedures of the program are at <http://dhfs.wisconsin.gov/medicaid/updates/2007/2007-10.htm>

Also, other information can be obtained at, <http://www.dhfs.state.wi.us/>, enter "Psychotherapy" in the search box. Also put in "SED,In-Home."

What if I need supervision for licensure and Approved Provider Status?

This question is very important for your career management. Please read this closely.

This is a particular strength of Shorehaven. We have some great clinical supervisors to guide and teach you. In the SED program, Valynda Wells, PhD, is the Consulting Psychologist. The Lead presents the cases to her every month and you are welcome to attend. In the UBH program, Don Rosenberg, MS, LP, LMFT, CSAC, is the Consulting Psychologist. He is also a Certified Independent Clinical Supervisor for AODA and an AAMFT-Approved Supervisor. You will present UBH cases to him about once per month.

If you are working on your license, you will also be connected with a supervisor who has the correct credentials to supervise your work and sign off on your license application. Clare Lewis, MSW, LCSW, supervises APSWs who are seeking LCSW licensure. Valynda Wells, PhD, supervises LPCs in training for the LPC license. Don Rosenberg, MS, LMFT, CSAC, supervises both LMFTs in training for the LMFT license and SAC-ITs seeking SAC status. If the candidate for the LMFT, LPC, or LCSW also wants an endorsement for addictions counseling, Don Rosenberg provides the supervision for the endorsement.

Not all of our applicants understand the distinction between Licensure and Approved Provider Status. Approved Providers are persons who have a Masters and have worked a minimum of 18 months full time or the equivalent (e.g., 36 months at half time). They have completed 3000 hours of WORK, which includes clinical work and all closely associate responsibilities. They provided psychotherapy as the main duty. Once the applicant completes this service, an application goes in which entitles the person to Approve Provider Status. This means the clinician's work can not be billed to third parties – insurers! The clinician can acquire

a number from Medicaid to bill to Medicaid in the name of Shorehaven, with himself or herself as the provider. That means he or she becomes a LEAD Psychotherapist.

[Note: The state is phasing out the Approved Provider Status. Anyone who graduates after 1/1/11 will most likely not be able to attain this status before it is phased out in 2013.]

The supervision for this job can be done by a variety of staff members, it is far more flexible than supervision for licensure.

Not that takes a minimum of 18 months. Work over 40 hours per week cannot be counted.

Licensure takes two years or more only from the point you achieve a training license, requires an exam, and requires supervision only by a supervisor designated by the licensing board.

The work you do for Approved Provider Status can all be used for Licensure if you acquired the training license in advance and you were supervised by the correct supervisor.

Note: Many people refer to Approved Provider Status as “your 3000 hours” or your “3000 hour letter.” This is because the state issues a letter approving your status when you apply after completing 3000 hours. Don’t confuse this with the 3000 hours needed for licensure. While in essence they are the same hours, the terminology “3000 hours” usually refers to Approve Provider Status.

For the person who has no experience in private practice or commission (fee-for-service) employment settings. How does that work? Why should I move to a commission?

Yes, it's common among salaried people to have concerns about shifting to commission. Most of our staff has made that transition and many wonder why they took so long to do so. But it's a very individual issue.

Commission employment gives you much greater flexibility to increase pay when you need to work harder, make up hours for time you take off, take off when you need to, expand or contract your hours as personal needs dictate, and increase your up-side potential earnings from the customary wage in our community of \$38-48,000 for a Masters with licensure to as high as \$65-70,000 – additional hours of work translate into additional dollars, which is not true of the usual salaried position. For Second Therapists, the full time earnings should be around \$20,000-\$26,000 for only SED cases, \$28,000 to \$40,000 for a mix of SED and UBH cases. We do not recommend taking only UBH cases because the wait time for payment is much longer, though the pay is on the order of \$36,000-\$42,000. [The lower figure is based on 30 collectible billable hours per week and the higher is based upon 38, which would be more than full time work, although several of our staff are at those levels.]

The real value of this work is that a person without a Masters does not usually achieve a high rate of pay in the mental health field where a Masters is the ‘entry’ level degree. And after less than two years, the full time clinician with a Masters will become a Lead, working toward the correspondingly higher pay.

All in-home staff are paid on commission. We pay 53-55% commission, which is very competitive, for those who qualify, who have 2-5 years of experience after the Masters Degree, and who have a Title 19 provider number (LEADS). We also pay 53-55% for those who qualify to be Seconds. (If you qualify for Approved Provider Status at any point, we will help you with the documents.) When therapists achieve full caseloads and several years of experience, we increase the percentage.

As far as we are aware, our competitors in the in-home program pay 45% to 50% commissions, occasionally 55% as a top end. *Those who live over 50 miles from Brown Deer are paid a premium in order to compensate for coming to Brown Deer for supervision and meetings.*

We pay you generally speaking the next payroll after the money is received at Shorehaven. We do close the payroll about three working days before payroll so the staff has time to process the payments we have received.

Commission is not for everyone. When you are starting, you need to be aware that payment depends upon authorization for services, the payment cycle of the funding source, processing time, completion of your paperwork, when you turn in your billing, and other factors. While some payers respond rapidly, some take 30-45 days to pay once all the documentation is correct. Sometimes it takes additional time to procure authorizations. Sometimes billing goes in and some problem causes it to be rejected, the problems corrected, and re-billing to occur, meaning an additional delay. Persons who cannot wait several weeks for first paychecks may not do well in this work. Once a pipeline of work has been completed and billed, commission work produces a steady, though quite variable level of pay.

What is the expected level of pay?

LEADS. We advertise on systems, such as Milwaukeejobs.com, at \$35-\$38 per clinical hour for Leads, \$14.50-\$20 for Seconds. The format of MilwaukeeJobs.com requires a figure, but the explanation tells you it's a commission system. So what can a Lead Therapist expect to make on a weekly basis? At 30 collectible billable hours, the average for a less experienced LEAD therapist would be \$1,074 per week. That's \$35.80 per collectible billable hour. Later we will discuss the non-billable hours. If you are focused and organized, it takes about 2-4 months of work to get to that level. We have the cases for your to see, but you have to complete authorizations and turn in billing and the payer has to reimburse us. Remember, that's the average. It depends upon when we are paid, when you submit billing, when payers pay (some pay weekly, some monthly), so some weeks could be half that, some triple that. Money is paid out every two weeks, right after it comes into the clinic.

More experienced staff who have been with us for a few years make more like \$1,170/week average for 30 billable hours. That's \$39 per hour. The harder working staff can make as much as \$1,360-1,490 by putting in more hours per week.

SECONDS. The rate of collection is set by the payers, not by Shorehaven. Because payers view a Masters plus Licensure as the entree to the field, the pay level for Seconds is pegged at a lower level. Roughly, we receive \$26 per collectible hour for a Second versus \$65 for a Lead, in the SED program. We receive \$95 per day in the UBH program for a Second versus \$130 for a Lead. We pay both at the 53-55% commission rate, but you can see the weekly and annual pay will be different until you achieve Approve Provider Status so you can be a Lead. That should be quite an incentive.

Seconds, therefore, at 30 collectible hours per week will earn an average of \$439 in the SED program or \$610 with a mix of SED and UBH cases. But Seconds have less paperwork to do than Leads, so many work more than 30 collectible hours, with proportionately higher pay. At 40 collectible hours, which is working very hard, we might add, the range is \$572 (SED only) - \$814 (mix).

Remember you are paid for driving time. It's included in the fee we collect.

Averaging over 52 weeks, how many hours per week does a full time lead therapist see clients in face to face contact?

Full time is up to the therapist. Paid, billable hours in the in home program include driving time in the SED program and often in the UBH program. We suggest you consider full time to 30 billable hours (including driving time), supported by about 10-15 non-billable hours. Some staff do 35, 38, even 40 billable hours. It depends upon your commitment, drive, focus, etc.

What happens regarding no shows and cancellations with respect to wages?

This is complex. 1) Our payers do not pay for those generally, with few exceptions. 2) You can sometimes drive on to the next household and lose almost no paid time. 3) You can reschedule the hour and still get some paid time with that case, usually the same week. 4) We set our commission rate at 55% or higher in a market where 45-50% is common nowadays so you are compensated well for your work, where billable hours are the vehicle for it, and where you should think of all the non-billable time as remunerated because the total compensation is excellent and includes a factor for the non-billable time. It's wise to think of earnings on an annual basis

rather than a weekly basis – this smooths out the inevitable wrinkles, cancellations, and non-billable time.

Note: For staff who live 90-120 minutes from our office, we pay extra compensation. This pays the staff for the time required to come into Brown Deer for supervision and meetings.

Also remember we are giving you very expensive licensure supervision.

How are vacations handled?

The same is true of vacations. We do not pay for vacation time. But therapists tend to load up hours the weeks before taking time off or afterward and don't lose much in the way of billable hours for making time for trips. Again, the commission rate is meant to compensate for this as well.

How are cell phones and car expenses handled?

The same is true for cell phone. We require a cell or pager, but do not pay for that because again we've increased the commission to cover the cost. We would rather pay the staff this money than hire someone to keep track of the cell phone bills and mileage for dozens of people. Makes more sense this way.

Like car expenses, cell expenses are an employee business expense. Discuss with your accountant how much of these expenses will be deductible. If you check IRS form 2106 you will get an idea. This deduction can give you some additional dollars.

How are therapists reimbursed for mileage or travel time?

You receive the same payment for driving to client homes as for seeing clients! So we do not pay mileage on top of that. You'll be driving at your regular rate usually, when driving is billable. IRS and Medicaid rules do not permit charging from home to work (which means to the office or the first stop of the day. Discuss with your accountant.). So you will be paid and often able to deduct your direct costs in addition.

What benefits are included?

- 1) 50% of the premium for health insurance for the employee only or \$275, whichever is more (after 90 days of full time employment).
- 2) Dental is available at employee expense.
- 3) It is an employee position, so employer's Medicare and Social Security is paid. This saves you self-employment tax of 15.3% that you'd pay in companies which list you as an independent contractor.
- 4) 401k with a small employer match. We request all employees to put 4% into the 401k, although an opt out provision is provided.
- 5) Profit sharing plan - unheard of in mental health clinics.
- 6) Flexible Spending Account – You can pay up to \$2600 of your medical bills in pre-tax rather than post-tax dollars and save 20-40% on the taxes.
- 7) Online CEU service paid by the company.
- 8) We supply office amenities to assist in the work -- access to computer, copier, email, phone system, website, etc.
- 9) Time off is at your discretion.
- 10) We supply licensure supervision.

What are the hours for this job?

The hours are partially flexible. Children are home in the afternoon and early evening, Saturdays, school holidays, summers. That's when staff do the in-home work. Some work can be done with parents and adult clients during the day. Some office work can be done during the day. In addition to billable hours, there are

a limited number of meetings, supervision and consultation, paperwork, etc., which can be done during the day.

What does a "typical" daily schedule look like.

There is no typical day other than spending time writing authorizations and making phone calls during the morning, then seeing cases from 12:00 or 1:00 to 7:00 or 8:00 as many days per week as you care to, and Saturdays if you desire to.

Remember this job as a crucial advantage over salaried jobs, namely your flexibility and independence to schedule as you need to and take time as you need to.

OUTPATIENT PSYCHOTHERAPY

Can I also do outpatient psychotherapy as well as in-home?

No. Only Leads can do outpatient therapy. Some in-home LEAD therapists provide outpatient office therapy. Sometimes the ratio is 90% in-home and 10% office, mainly completed in-home cases which continue in outpatient. Sometimes the ratio is 50-50. The balance is up to the therapist.

APPLYING FOR THIS POSITION

Can I see a job description?

Yes. One is appended to this document along with a job application form.

The best way to apply for this job is to email a resume to ctrout@shorehavenbhi.com or to fax one to 414-540-2171. Telephone is not as useful since we are tied up or in session so many hours per week.

Don Rosenberg

President

Shorehaven Behavioral Health, Inc.

Shorehaven BEHAVIORAL HEALTH, Inc.

Employment Application Form

Personal Information:

Full Name _____ Social Security # _____

Telephone Number(s) home/work/cell _____

Address _____ City _____ State _____ Zip _____

Employment Desired

Position Applied For _____

Employment Sought: Full Time _____ Part Time _____ hours per week

Hours Available: Day _____ Evening _____ Saturday _____

Any other information about availability:

Date you can begin _____ Earnings desired _____

Are you currently employed? Yes _____ No _____

May we contact your current employer? Yes _____ No _____

May we contact your previous employer? Yes _____ No _____

At the time of employment, can you submit verification of your legal right to work in the United States, such as Social Security card, Voters Registration card, Drivers License, etc.? Y N

Education (HS not necessary for clinical positions)

High School _____ Location _____ Graduate? Y N

College _____ Location _____ Degree _____

Major(s) _____

College _____ Location _____ Degree _____

Major(s) _____

College _____ Location _____ Degree _____

Major(s) _____

Trade/Business/Graduate School _____

Location _____ Degree _____

Trade/Business/Graduate School _____

Location _____ Degree _____

Licenses and Certifications _____

Please answer: [may use other side]

Why are you interested in becoming an employee with SBH?

What are your career goals?

Where did you get information about the position?

Employment History (list most recent first)

Company _____ Supervisor _____ Last Position _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Dates of Employment _____ to _____

Job Responsibilities

Reason for Leaving

Employment Application Form-----Page Two

Company _____ Supervisor _____ Last Position _____
Address _____ City _____ State _____ Zip _____
Telephone _____ Dates of Employment _____ to _____
Job Responsibilities

Reason for Leaving

Company _____ Supervisor _____ Last Position _____
Address _____ City _____ State _____ Zip _____
Telephone _____ Dates of Employment _____ to _____
Job Responsibilities

Reason for Leaving

Company _____ Supervisor _____ Last Position _____
Address _____ City _____ State _____ Zip _____
Telephone _____ Dates of Employment _____ to _____
Job Responsibilities

Reason for Leaving

References

List 3 individuals not related to you who are familiar with your work-related skills

Name _____ Address _____
_____ City _____ Telephone _____ Years acquainted _____

Name _____ Address _____
_____ City _____ Telephone _____ Years acquainted _____

Name _____ Address _____
_____ City _____ Telephone _____ Years acquainted _____

Have you been the subject of a lawsuit or ethical claim related to work or a claim to a licensing or certification board or professional organization?

Y N

Explain:

Employment Application Form-----Page Three

Employee Release

There are number of Shorehaven policies that an applicant needs to know about and agree to before being employed. There also are a number of activities that SBH may want instigate as part of the review of the appropriate background information on an applicant. The purpose of this document is to present these policies and investigative activities to the applicant to ensure that they are understood and agreed upon at the time the application is submitted. We, therefore, ask you to please read, complete, and sign this form.

Policies

Your signature below indicates that you have read, understand, and agree to operate under these policies if employed at SBH.

1. SBH is an equal opportunity employer and does not discriminate because of age, sex, race, color, national origin, disability, sexual orientation, or religious preference. SBH is an equal opportunity provider of service and does not discriminate because of age, sex, race, color, national origin, disability, sexual orientation, or religious preference.
2. SBH is a drug and alcohol free workplace. To ensure worker safety and the integrity of the workplace, SBH prohibits the illegal manufacture, possession, distribution, or use of controlled substances or alcohol in the workplace by its employees. Offers of employment may, therefore, be conditioned upon a physical examination, including a drug and alcohol screening. Drug testing prior to employment is not permitted, but testing after a conditional offer has been made is permitted.
3. Smoking is only permitted in the designated outdoor areas, not outside in the front of the building. Smoking is not permitted at our other locations except outside. Smoking is permitted only on scheduled breaks.
4. Your signature on this Release form indicates that you understand and agree that if employed, that employment is for no definite period, and may, regardless of the date of payment of wages and salary, be terminated at any time without previous notice.
5. An offer of employment must originate from the Executive Director or President.

6. Background Review

The following investigative activities may be conducted by SBH as part of the background review of prospective employees. Your signature on this Release Form indicates that you understand these activities and you authorize them to be performed with the conditions specified below.

- A. You authorize SBH to undertake a criminal records check as **required** under state law and will sign the required state forms.
- B. You authorize SBH to obtain a Motor Vehicle Record report. Transport of a client, while not encouraged, may occur, and transport of other personnel may occur. It is imperative that a good driving record exists and that you supply a copy of your auto insurance.
- C. You authorize and request any and all of your former employers to furnish any and all information regarding your job performance. You agree to hold your former employers and their agents harmless from all liability which could relate in any way to the disclosure of private information or an assessment or opinion of your suitability for employment.

In closing, we ask that you read these statements and complete them and your signature on this Release Form indicates you understand each.

- 1.. I have been given and understand the job information for the position of Second In-Home Psychotherapist/Case Manager.
2. I understand that misrepresentation or omission of facts herein is cause for termination, if I am employed by SBH.
3. I have read and understand the application and have answered all portions of the application truthfully and correctly, with no omissions.
4. I authorize my past employers and my references to release information in accordance with paragraph C above.

Print Your Name: _____

Signature

Date

Witness

Date

rev 5/25/06