

ACCAP CHORES & MORE INDEPENDENT CONTRACTOR APPLICATION

HOURS: Days and hours are flexible, on-call as needed, or arranged with client.

HOURLY REIMBURSEMENT: Paid monthly (after invoice is submitted to Concur Accounting Services)

Homemaker Services: \$17.00/hour, 2 hour minimum

Includes light housekeeping (laundry, vacuuming, dusting, washing floors, cleaning bathroom, cleaning kitchen)

Chore Services: \$19.00/hour, 1 hour minimum

Includes heavy housework (washing walls, windows, cleaning refrigerator or oven), basic home maintenance, yard work (mowing, trimming, snow removal). NOTE: Independent contractor power equipment fee, if used, is \$5 per job.

QUALIFICATIONS: Possess or express a positive willingness to perform any of the following chores: yard and garden maintenance, snow removal, shrub trimming, household cleaning, light maintenance, painting, minor repairs such as minor plumbing, minor electrical, carpentry, plastering, etc.

Ability to follow instructions, work independently, have access to a computer and internet/email, schedule own work, and communicate well with senior citizens. Have independent transportation; owning some tools and equipment is helpful, but not essential.

DUTIES: You will work as an independent contractor for citizens over the age of 60 in Anoka County.

As an independent contractor, you will be asked to submit an invoice for <u>all work completed in previous month</u> on the 5th of each month. This is required for reimbursement for your time for the Chores & More Program.

The Chores & More Coordinator will screen your application, process a criminal background check, interview you, explain the procedures, and if everything is satisfactory, refer you to clients who need work done.

If you are interested, please complete the attached Independent Contractor Application which includes a skills inventory sheet and criminal background check (must be notarized). Thank you!

RETURN TO:

ACCAP Chores & More Program 1201 89th Avenue NE, Suite 3500

Blaine, MN 55434 763-783-4767

Fax: 763-783-4700

Email: Choresandmore@accap.org

NAME:		EMAIL:		
ADDRESS:				
		CELL PHONE:		
********	******	**********	******	
Please check the service catego	ories in which	you have experience and are willing	to work:	
HOME MAINTENANCE & REPAI	R			
Caulking and weather stripping	<u> </u>			
Painting – Interior		LAWN WORK		
Painting – Exterior		Mow Lawns		
Repair windows		Weeding		
Minor electrical		Rake Leaves		
Appliance repair – electric		Tree & shrub trimming		
Appliance repair –gas				
Cement repair		GARDEN WORK		
Reglaze windows		Planting		
Faucet & toilet repairs		Tilling		
Minor carpentry		Transplanting		
HOUSEHOLD CHORES		SNOW REMOVAL		
Change storm windows		Shovel walks & drives		
Wash windows		Operate snow blower		
Clean gutters (1 story only)		Remove snow from roof (1 stor	y only)	
Moving heavy objects				
Heavy cleaning		INSTALLATION	*	
		Alarms		
INDOOR HOUSEKEEPING		Locks		
Vacuum		Handrails & grab bars		
Clean floors				
Dust		OTHER SKILLS (please list)		
Laundry				
Change bedding				
Do you have your own tools? –	Please list:			
Do you have your own tools:	r icase iist.			
,				

Anoka County o	ities you are willin	ng to work in? PLE	ASE CIRCLE AL	L THAT APPLY	
Anoka	Andover	Bethel	Blaine	Burns/Nowthen	Centerville
Circle Pines	Col Hts/Hilltop	Columbus	Coon Rapids	East Bethel	Fridley
Ham Lake	Lexington	Lino Lakes	Linwood	Oak Grove	Ramsey
St. Francis Spring Lake Pk			"All Anoka County Cities"		
What times are	you available to v	vork:			
Number of hou	rs available to wo	rk/week:			
How did you lea	arn of Chores & M	ore:			
Highest level of	education compl	eted:			
PREVIOUS WOR	RK EXPERIENCE				
Employer Name, Address, Phone #		_	Start Date	End Date	Salary
	ing:				
Employer Name, Address, Phone #		<u>#</u>	Start Date	End Date	Salary
1.1.0.1					
				End Data	Salary
	e, Address, Phone	-		End Date	
Reason for leavi	ng:				
Are you a currer	nt employee of AC	CCAP? Y N			
Do you give peri	mission for Chore	s & More to do a	background ch	eck? Y N	

<u>Name</u>	<u>Address</u>	<u>Relationship</u>	<u>Phone</u>
orker Comment:	s:		
nterviewer Comm	ents:		
erify that the ab	ove information is true and	grant you permission to contact	t the emplovers and
		grant you permission to contactividuals to disclose information	
eferences listed a			
	bove. I authorize those indi		that they have conce



ACCAP CHORES & MORE NON-PROFIT BACKGROUND CHECK

Account #7637676521

The following named individual has made application with the agency for:

Independent Contracting with ACCAP Chores & More

Last Name of Applicant (please print):	*
First Name (please print):	
Maiden, Alias or Former (please print):	,
	Sex (M or F):
Social Security Number (Optional):	
I authorize the Minnesota Bureau of Criminal Ap information to <u>The Anoka County Community Ac chores with vulnerable adults</u> with this agency.	tion Program, Inc. for the purpose of contracting to do
signature.	period no longer than one year from the date of my
Signature of Applicant	Date
STATE OF MINNESOTA))ss. COUNTY OF ANOKA)	
Subscribed and sworn to (or affirmed) before me	this day of, 20, by
	Notary Public