

CONTRACT HOME REPAIR PROFESSIONAL APPLICATION CAPABLE Project

Requirements:

- **Must have a valid Driver's License.** Limited travel requirements to and from service delivery region in Bastrop County.
- Ability to work within a collaborative, client-directed model
- Ability to carry minimum liability insurance
- At least two years' experience performing home repair services

Name: Name		
Address: Street Address	City: City	
State: State	Zip: Zip	
Phone: Phone number with area coo	de	
Alt. Phone: Alt. phone		
Email: Email address		
Certifications: Enter any special certifications or licensures Insurance: Enter insurance company name and policy number (Attach proof of insurance to application)		
Do you speak more than one langua	age? 🗌 Yes	🗌 No
If yes, what language(s)? Choose an item.		
Speaking level: Choose an item	n.	
Writing level: Choose an item.		

Please describe your experience providing home repair services, especially to older adults. Click here to enter text **Please describe your interest in working within a collaborative, client-based model.** Click here to enter text

(Initial here) I <u>certify</u> that all the information I provided in connection with this application, whether provided on this document or not, is true, complete, and correct to the best of my knowledge. I understand that the information will be used to evaluate my application, and that if I <u>knowingly</u> supply incorrect, incomplete, or misleading information on the application or during the interview process I will not be selected or, if selected, that I will be subject to immediate dismissal.

Signature

Date

Once complete, please attach your resume and any other applicable information and send via email to swright@capcog.org