

# Interview Note Sheet

## Applicant Information

Name: Wendi Mosiro	Interviewer: Steven G
Date: 5/14/18	Rate of Pay: \$ 11
Position (s) Applied for: Housekeeping/Laundry/Server	Referred by: Workforce Job Fair

Test Scores						Seeking
Server	/35	%	Bartender	/35	%	Full-Time
Prep Cook	/20	%	Barista	/15	%	
Grill Cook	/40	%	Cashier	/15	%	
Dishwasher	/10	%	Housekeeping	/14	78 %	Part-Time

## Relevant Experience & Summary of Strengths

Total of \_\_\_\_\_ in Food Service/Hospitality

Wendi's work experience is Home Care Assistants. She wants to come back to work after so many years of stay at home. She wants part-time only.

P.O.S. Experience: Y / N details: \_\_\_\_\_

## Transportation

Car

Public Transit

Carpool ( Rider / Driver )

## Regions Available to work

Kansas City, KS

Overland Park, Kansas

Kansas City, MO

Independence, MO

## Certifications (if any)

TIPS

Serv-Safe

LEAD

Other \_\_\_\_\_

Will Submit

## Availability

Open

AM only

PM only

Weekdays only

Weekends only

Details:

## Uniforms Owned:

Bistro      Black Bistro      Tuxedo      1/2 Tuxedo      Black Vest      Long Black Tie

Chef Coat      Chef Pants      Knives      Black Pants      Non-Slip Shoes      Bow Tie      Other: \_\_\_\_\_

Would you recommend this applicant for Acrobat Academy?

Convention Candidate?

Other Languages Spoken:

**Wendi Mosiro**

6508 Hedge Lane Terrace Apt 104  
Shawnee Ks, 66226  
wendimosiro@yahoo.com  
Phone Number: 913-215-6123

**Work Experience:**

**Home Care Assistants**  
**7214 College Blvd.**  
**Overland Park, KS 66210**

**November 2016-January 2018**

- Answer patients' call signals.
- Turn and reposition bedridden patients, alone or with assistance, to prevent bedsores.
- Observe patients' conditions, measuring and recording food and liquid intake and output and vital signs, and report changes to professional staff.
- Feed patients who are unable to feed themselves.
- Provide patients with help walking, exercising, and moving in and out of bed.
- Provide patient care by supplying and emptying bed pans, applying dressings and supervising exercise routines.
- Bathe, groom, shave, dress, or drape patients to prepare them for surgery, treatment, or examination.
- Transport patients to treatment units, using a wheelchair or stretcher.
- Clean rooms and change linens.
- Successful in charting all aspects of the patient's daily activities.

**Stay at home mom**

**2012-2016**

**Licenses & Certifications**

CNA, HHA, CPR - May 1994

Certified Nurse's Aide, Home Health Aide, Cardio Pulmonary Resuscitation.

Housekeeping Test

1. During which of the following situation(s) should you wear gloves?
  - a) When handling disinfectant solutions
  - b) When cleaning guest rooms
  - c) When handling soiled linen
  - d) When handling or disposing of waste
  - e) All of the above
2. Which of the following should be cleaned daily?
  - a) Chairs, lamps, and tables
  - b) Tabletops, bed, and handrails
  - c) Grab bars, light, tops of doors and counters
  - d) Floors, sinks, toilets, and latrines
  - e) All of the above
3. True or False: You do not need to use a separate cloth for cleaning bathrooms.
4. True or False: Dusting is most commonly used for cleaning walls, ceiling, doors, windows and furniture.
5. Should the following be cleaned daily or weekly? Circle one.
  - a) Floors       Daily/ Weekly
  - b) Toilets and latrines       Daily/ Weekly
  - c) Carpets in guest rooms       Daily/ Weekly
  - d) Carpets in offices       Daily/ Weekly
  - e) Soiled linen       Daily/ Weekly
6. The best way to clean the floors:
  - a) Scrubbing
  - b) Dry sweeping and dusting
  - c) Sweeping, mopping and dusting
  - d) Wet mopping
7. What should do if you spill liquids or see a liquid spill?
  - a) Leave it for someone else to clean- up
  - b) Wait until the end of your shift to clean it
  - c) Flag the spill and clean it up immediately
  - d) Not sure
8. The proper procedure for cleaning spills of blood and other body fluids is:
  - a) Wearing gloves, clean with cloth soaked in chlorine solution and follow up with disinfectant solution
  - b) Find the janitor on- duty and ask him to clean it up
  - c) Grab whatever is closest and wipe up immediately, then mark "Biohazard"
  - d) Nothing
9. What do you do if you encounter with bed bugs in a guest room? *Spray for bugs clean. Notify supervisor.*
10. What do you do if you find Lost and Found items in a guest rooms? *Turn it into manager.*
11. Describe the difference between a disinfectant and a cleaning solution? *Cleaning just cleans. Disinfectant - Disinfects.*



## Employment Application

Acrobat Outsourcing is an equal opportunity employer dedicated to non-discrimination in all employment practices. Acrobat Outsourcing selects the best qualified individual for the job based on job-related qualifications regardless of race, age (40+), color, religion, gender, national origin, ancestry, marital status, sexual orientation, disability or any other status protected by applicable law.

### PLEASE PRINT

Full Name Wendy Mosiro Date: 5-14-18  
Home Telephone (913)215-6123 Other Telephone ( )  
Present Address 6508 Hedge Lane Terrace Apt. 104 Shawnee Kansas  
Permanent Address, if different from present address: Same  
Email Address wendimosiro@yahoo.com

### EMPLOYMENT DESIRED

Position applying for: Dictionary and Salary desired: TBD  
Are you currently registered with any staffing and/or employment agencies? If so, please list

Are you applying for: Full-time work? Yes  No  Part-time work? Yes  No

Temporary work, e.g., summer or holiday work? Yes  No  From Current To: \_\_\_\_\_

How did you find out about our open position? (Please check, fill in proper name of source):

Referral  Name of Referral Workforce center Newspaper  Job Fair  Agency  Company Website

Other Web Posting  Other Source

Could you work overtime, if necessary? Yes  No  If hired, on what date could you start working? May 15, 2018

Please keep in mind that schedules and shifts may vary depending on position and season. Additionally, the hours may vary from week to week, depending on the company needs. Please list only the times/days you're available to work below.

SPECIFY HOURS AVAILABLE DAILY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AM	9am	9am	9am	9am	9am	9am	
PM	5pm	5pm	5pm	5pm	5pm	5pm	

Do you have any vacations or extended leaves planned in the next 12 months? If so, please list dates:

### PERSONAL INFORMATION

Have you ever applied to or worked for Acrobat Outsourcing before? Yes  No  If yes, when? \_\_\_\_\_

Do you have friends or relatives working for Acrobat Outsourcing? Yes  No  If yes, please state name and relationship

If hired, would you have a reliable means of transportation to and from work? Yes  No

If hired, can you present evidence of your legal right to live and work in this country? Yes  No

State age if you are under 18 \_\_\_\_\_. If you are under 18, hire is subject to verification that you are of minimum legal age to work.

Are you able to perform the essential functions of the job for which you are applying? Yes  No



Your Hospitality Staffing Professionals

If no, describe the functions that cannot be performed. (Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pursuant to any and all Fair Chance Ordinances, we will consider for employment qualified applicants with arrest and conviction records.

#### EDUCATION & SKILLS

NAME OF SCHOOL	CITY & STATE	GRADE OR DEGREE COMPLETED	DID YOU GRADUATE?
Basehor High School	Basehor KS	12	yes
Do you have any special licenses, certificates or special training? If so please list under "Special".		YES	NO
Are you computer literate? If so, list software knowledge under "Special."		YES	NO
Are you proficient with Point of Sales Systems? If so please list which ones under "Special."		YES	NO
Do you have any other experience, training, qualifications or special skills, which you feel make you especially suited for work at Acrobat Outsourcing? If so, please list under "Special."		YES	NO
Special:			

#### EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). Account for unemployment periods of three months or more.

Are you currently employed? Yes        No        If so, may we contact your current employer? Yes        No       

Name and Address of Employer X/1A

Type of Business \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Your Position and Duties \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Type of Business \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Your Position and Duties \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

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outsourcing

Your Hospitality Staffing Professionals

Type of Business \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Your Position and Duties \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Type of Business \_\_\_\_\_ Telephone No. (\_\_\_\_) \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Your Position and Duties \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Have you ever been fired from any previous place of employment? If so, please explain: \_\_\_\_\_

## MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military? Yes \_\_\_\_\_ No \_\_\_\_\_  
If so, describe: \_\_\_\_\_

## JOB RELATED REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name: Dave Johnson Telephone No. (913) 663-5000

Address \_\_\_\_\_

Occupation: RN Relationship: Supervisor Number of Years Acquainted: 1 1/2

Name: Dave Allen Telephone No. (913) 713-1948

Address \_\_\_\_\_

Occupation: \_\_\_\_\_ Relationship: Friend Number of Years Acquainted: 8

Name: \_\_\_\_\_ Telephone No. (\_\_\_\_)

Address \_\_\_\_\_

Occupation: \_\_\_\_\_ Relationship: \_\_\_\_\_ Number of Years Acquainted: \_\_\_\_\_



**Please Read Carefully, Initial Each Paragraph and Sign Below**

WM I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material facts on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

WM I hereby authorize Acrobat Outsourcing to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

WM I hereby authorize Acrobat Outsourcing and its authorized representatives to solicit information regarding my background, which may include but not be limited to, information about my employment, education, and/or criminal history, which may be in the files of any federal, state, or local criminal justice and law enforcement agency and general public records history.

WM I understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 form in this regard within three days of my hire date.

WM Acrobat Outsourcing is an at-will employer. I understand that nothing contained in the application, or conveyed during any interview, which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, with or without cause, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

I hereby acknowledge that I have read and understand the above statements.

Applicant's Signature Mereli Morio Date 5-14-18



**Case Verification Number: 2018135160613BG**

Report prepared: 05/15/2018

### **Company Information**

**Company ID:** 139349

**Company Name:** Acrobat Outsourcing

**Client Company ID:** 139349

**Client Company Name:** Acrobat Outsourcing

### **Employee Information**

**Name:** Wendi R. Mosiro

**Date of Birth:** 11/23/1975

**U.S. Social Security Number:** \*\*\*-\*\*-0525

**Employee's First Day of Employment:** 05/15/2018

**Citizenship Status:** U.S. Citizen

### **Document Information**

**List B Document:** Driver's license or ID card issued by a U.S. state or outlying possession

**Expiration Date:** 11/23/2023

**State:** Kansas

**List C Document:** Social Security Card

### **Case Information**

**Current Case Result:** Closed

**Case Submitted By:** Diana Zamora

**Case Status:** Employment Authorized

**Reason for Closure:** Employment Authorized Auto Close