

## Assisted Living Facility Background Disclosure Statement for Applicants for Employment

### Section I – Facility Information

**Instructions:** Facilities must complete Section 1 of this disclosure statement and provide it to any applicant who applies for employment at the facility. If an applicant for employment indicates on this disclosure statement that they have lived in another state within the past five years, a facility must conduct a name-based criminal history check in each state in which the applicant previously resided within the 5-year period.

Facility Name	License No.	Area Code and Phone No.
Address ( <i>Street, City, State and ZIP Code</i> )		
Manager	Date Disclosure Statement Completed	

### Section II – Applicant Information

**Instructions:** Complete section, sign and return to facility manager.

Applicant Name	Applicant Area Code and Phone No.	Applicant Date of Birth
Applicant Address ( <i>Street, City, State and ZIP Code</i> )		Date Disclosure Statement Completed

I have been convicted of an offense described in [Texas Health and Safety Code Section 250.006](#):  Yes  No

I have lived in a state other than Texas within the past five years of the date of completion of this form:  Yes  No

If yes, list of states applicant has lived in other than Texas within the past five years:

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**