



# PUBLIC AUTHORITY REGISTRY UPDATE FORM

**1. Please print clearly and complete all current contact information below and do not leave any section blank.**

Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number (where client's can reach you) Home#: \_\_\_\_\_ Cell #: \_\_\_\_\_

Last 4 Digits of SS#: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please check to remove home/ mailing address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Please check to remove a phone number: \_\_\_\_\_

Please check to add a phone number: Home#: \_\_\_\_\_ Cell#: \_\_\_\_\_

I am NO longer working with Clients: \_\_\_\_\_

**2. I am not available to work for any clients at this time and DO NOT wish to have my name referred out because:**

I have enough clients and would like to be placed as Fully Employed (I will be required to check in once every 3 months to update.

I would like to be inactive for personal/medical reasons.

I have a job outside of the Registry.

I would like my name removed from the registry.

Other: \_\_\_\_\_

**If you checked one of the boxes in Question #2, PLEASE STOPE HERE, SIGN AND RETURN.  
If not, PLEASE ANSWER QUESTION 3-7, SIGN AND RETURN.**

**3. I am currently working for the following clients. Pleas provide name of clients hours (example 8a-4pm) and days working.**

Client 1: \_\_\_\_\_ Hours: \_\_\_\_\_ Days: \_\_\_\_\_

Client 2: \_\_\_\_\_ Hours: \_\_\_\_\_ Days: \_\_\_\_\_

Client 3: \_\_\_\_\_ Hours: \_\_\_\_\_ Days: \_\_\_\_\_

Client 4: \_\_\_\_\_ Hours: \_\_\_\_\_ Days: \_\_\_\_\_

**4. Please let us know what skills you feel comfortable performing in a client's home. (Please check all boxes that apply)**

- Light Cleaning (AA)
- Preparation of Meals (BB)
- Meal Clean-Up (CC)
- Routine Laundry (DD)
- Shopping for food (EE)
- Other Shopping & Errands (FF)
- Heavy Cleaning (GG)
- Medical Appointments (SS)
- Accompaniment to Alternate Resources (TT)
- Remove Grass/Weeds/Rubbish (UU)
- Remove Ice/Snow (VV)
- Protective Supervision (WW)
- Teaching & Demonstration (XX)
- Paramedical Services (YY) \*\*  
(incl. assistance with medications) \*\*
- (e.g. insulin, enemas, etc.) \*\*
- Respiration (HH)
- Bowel & Bladder Care (II)
- Feeding (JJ)
- Routine Bed Baths (KK)
- Dressing (LL)
- Menstrual Care (MM)
- Ambulation (NN)
- Moving In/Out of Bed (OO)
- Bathing/Oral Hygiene/Grooming (PP)
- Rubbing Skin / Repositioning (QQ)
- Care & Assistance with Prosthesis

**5. I am available to work for Clients on (Please enter available times, time you wish to start and stop working.)**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>Example:</b>	<b>9am-8pm</b>	<b>8am-10am</b>	<b>9am-8pm</b>	<b>8am-10am</b>	<b>OFF</b>	<b>9am-8pm</b>	<b>8am -11am</b>

**6. Please check the boxes for the areas you are willing to work in. (Do not select cities that are more than 20 miles from your home)**

<input type="checkbox"/> <b>Adelanto</b> - El Mirage - Palmdale - Cajon Junction  <input type="checkbox"/> <b>Apple Valley</b>  <input type="checkbox"/> <b>Barstow</b> - Baker - Hinkley - Yermo - Lenwood - Fort Irwin  <input type="checkbox"/> <b>Big Bear City</b> - Sugarloaf Mtn - Fawnskin - Big Bear Lake  <input type="checkbox"/> <b>Big River</b> - Earp - Parker Dam - Vidal Junction  <input type="checkbox"/> <b>Chino</b> - Chino Hills - Pomona	<input type="checkbox"/> <b>Colton</b> - Bryn Mawr - Grand Terrace - Loma Linda  <input type="checkbox"/> <b>Crestline</b> - Cedar Pines Lake - Lake Gregory Village - Twin Peaks - Rimforest - Valley of Enchantment - Crestpark  <input type="checkbox"/> <b>Devore</b> - Lytle Creek  <input type="checkbox"/> <b>Fontana</b> - Bloomington - Rialto  <input type="checkbox"/> <b>Forest Falls</b> - Angelus Oak - Oak Glen  <input type="checkbox"/> <b>Helendale</b> - Silver Lakes - Oro Grande	<input type="checkbox"/> <b>Helendale</b> - Silver Lakes - Oro Grande  <input type="checkbox"/> <b>Hesperia</b> - Oak Hills  <input type="checkbox"/> <b>Joshua Tree</b>  <input type="checkbox"/> <b>Yucca Valley</b>  <input type="checkbox"/> <b>Lake Arrowhead</b> - Arrowbear - Cedar Glen - Green Valley Lake - Running Springs - Blue Jay  <input type="checkbox"/> <b>Landers</b> - Johnson Valley  <input type="checkbox"/> <b>Lucerne Valley</b>  <input type="checkbox"/> <b>Morongo Valley</b>  <input type="checkbox"/> <b>Needles</b> - Havasu Lake	<input type="checkbox"/> <b>Newberry Springs</b> - Ludlow - Nipton  <input type="checkbox"/> <b>Ontario</b> - Guasti - Montclair  <input type="checkbox"/> <b>Phelan</b> - Baldy Mesa - Pinon Hills  <input type="checkbox"/> <b>Rancho Cucamonga</b> - Alta Loma - Etiwanda  <input type="checkbox"/> <b>Wrightwood</b>  <input type="checkbox"/> <b>Yucaipa</b>	<input type="checkbox"/> <b>Redlands</b> - Mentone - Crafton  <input type="checkbox"/> <b>San Bernardino</b> - Highland  <input type="checkbox"/> <b>Trona</b> - Kramer - Red Mountain  <input type="checkbox"/> <b>Twentynine Palms</b> - Wonder Valley  <input type="checkbox"/> <b>Upland</b> - Mt. Baldy - San Antonio Heights  <input type="checkbox"/> <b>Victorville</b> - Desert Knolls - Spring Valley Lake
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**7. Provider Preference**

- \*Will you work for men, women or both?.....  Men.....  Women.....  Both
- \*Do you smoke?..... Yes  No
- \*Will you work for a smoker?.....  Yes  No
- \*Do you have access to a car?..... Yes  No
- \*Will you work with pets?..... Yes  No
- \*Do you rely on public transportation?..... Yes  No
- \*Are you willing to use your car on the job?.....  Yes  No
- \*Are you willing to drive a client's car?.....  Yes  No

\_\_\_\_\_  
**Provider Signature**

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