

Application For Employment

Pre-Employment Application
Equal Opportunity Employer

Date: _____

Section 1. Personal Information

Last Name:		First Name:		M.I.:
Present Address:			City:	Zip:
Permanent Address:			City:	Zip:
Phone No.:	E-mail:		Soc. Sec. No.:	
Emergency Contact:			Phone No.:	

Section 2. Background Information

Position:		Available Start Date:	
Are You Employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are You A U.S. Citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are You 18yrs or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If No, Are You Legally Able To Work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have You Applied To This Company Before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, When?	
Driver's License No.:		State:	

			Office Use Only:	
Driving is a requirement of this job. Is your license clean and valid?	<input type="checkbox"/> Yes <input type="checkbox"/> No		1.	
Do you have full time access to a vehicle?	<input type="checkbox"/> Yes <input type="checkbox"/> No		2.	
Is your vehicle in good and safe mechanical condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No		3.	
Is the vehicle covered by comprehensive liability insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No		4.	
Company:	Policy No.:			
Make:	Model:	Year:	5.	
Are you able to lift at least 50 lbs or more?	<input type="checkbox"/> Yes <input type="checkbox"/> No		6.	
Would you have difficulty standing, bending, or kneeling in connection with performing necessary cleaning duties?	<input type="checkbox"/> Yes <input type="checkbox"/> No		7.	
Have you ever been bonded? (all employees are required to be bonded)	<input type="checkbox"/> Yes <input type="checkbox"/> No		8.	
Have You Ever Been Convicted Of A Felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No		9.	
If Yes, Explain:				
May we contact your current and/or previous employers?	<input type="checkbox"/> Yes <input type="checkbox"/> No		10.	

Days Available: (Enter the times you are available for each day. Please enter "N/A" for unavailable days/times.)

	Mon.	Tue.	Wed.	Thurs.	Fri.	Sat.	Sun.		
Morning:								11.	
Afternoon:									

Section 3. Education History

<i>Name And Location Of School</i>		<i>Years Attended</i>	<i>Graduate?</i>	<i>Subjects Studied</i>	
High School		From:	<input type="checkbox"/> Yes	12.	
		To:	<input type="checkbox"/> No		
College		From:	<input type="checkbox"/> Yes	13.	
		To:	<input type="checkbox"/> No		
Trade or Other		From:	<input type="checkbox"/> Yes	14.	
		To:	<input type="checkbox"/> No		

Special Training and/or Skills:

Section 4. Past Experience

<p>Which of the following categories have you had experience in?</p> <p><input type="checkbox"/> Housekeeping <input type="checkbox"/> Janitorial <input type="checkbox"/> Service</p> <p><input type="checkbox"/> Fast Food <input type="checkbox"/> Manufacturing <input type="checkbox"/> Sales</p> <p><input type="checkbox"/> Homemaker <input type="checkbox"/> Restaurant <input type="checkbox"/> Hotel/Motel</p> <p><input type="checkbox"/> Other (explain):</p>		15.
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Section 5. Employment History (List Your Last Three (3) Employers, Starting With Most Recent)

<i>Date (MM/YYYY)</i>	<i>Name And Address Of Employer</i>	<i>Salary</i>	<i>Position</i>	<i>Reason For Leaving</i>	
From:					
To:					
Supervisor's Name:			Phone No.:		16.
<i>Date (MM/YYYY)</i>	<i>Name And Address Of Employer</i>	<i>Salary</i>	<i>Position</i>	<i>Reason For Leaving</i>	
From:					
To:					
Supervisor's Name:			Phone No.:		17.
<i>Date (MM/YYYY)</i>	<i>Name And Address Of Employer</i>	<i>Salary</i>	<i>Position</i>	<i>Reason For Leaving</i>	
From:					
To:					
Supervisor's Name:			Phone No.:		18.

Section 6. References:

(Please List Three Personal References That Are Not Related To You That's Known You For At Least 3 Years)

Name	Address And Phone Number	Business	Yrs Known

Section 7. To What Extent Would The Following Job Characteristics Be Attractive To You?

	Very Great	Great	Somewhat	Little	Very Little		
More flexible daytime hours than others.						19.	
Working in a team environment.						20.	
Opportunity to become a team leader.						21.	
Physical activity and exercise.						22.	
Opportunity to work full or part time.						23.	
Helping clients by keeping homes clean.						24.	
Good relationship with fellow employees.						25.	
Recognition by MNGMT for good work.						26.	
Opportunity to earn bonuses/awards.						27.	

How did you hear about us?	<input type="checkbox"/> Newspaper Ad	<input type="checkbox"/> Flyer	Referred By:
	<input type="checkbox"/> Craigslist.com	<input type="checkbox"/> Indeed.com	

Section 8. Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner

prohibited by the Americans with Disabilities Act (ADA) and other relevant Federal and State laws."

Date:

Signature:

Office Use Only:

Interviewed By:

Date:

This application is current for only 60 days from the date entered above.

DO NOT WRITE BELOW THIS LINE

Remarks:

Neatness:	Character:
Personality:	Ability:

Hired: <input type="checkbox"/> Yes <input type="checkbox"/> No	Position:	Training Needed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Wages:	Approved By:	
Start Date:	Interview Witness:	