



# Application for Employment

Today's Date: \_\_\_\_\_

## PERSONAL DATA

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

Current Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Day ( ) \_\_\_\_\_ Evening ( ) \_\_\_\_\_

How or by whom were you referred? \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

If hired and under 18, can you furnish a work permit?  Yes  No  I am over 18

Are you legally authorized to work in the United States?  Yes  No

(If hired, you will be required to submit proof of your identity and legal work authorization as a condition of employment.)

Do you have specific salary requirements?  Yes  No If yes, please indicate: \_\_\_\_\_

## EMPLOYMENT DATA

Date available for work: \_\_\_\_\_ Total hours available per week: \_\_\_\_\_

Type of hours:  Full time  Part time  Days\*  Nights\* \*Hours: \_\_\_\_\_

Regular  Temporary/What date will you no longer be available to work? \_\_\_\_\_

Will you work overtime if necessary?  Yes  No If yes, how many hours per week? \_\_\_\_\_

Are there any days or hours you are unable or unwilling to work? If yes, write specifics below:

\_\_\_\_\_

Do you have transportation to/from work?  Yes  No

Do you have a valid Driver's License?  Yes  No

## AN EQUAL OPPORTUNITY/DRUG-FREE EMPLOYER

We are an equal opportunity employer and do not discriminate against any applicant because of race, color, religion, sex, national origin, age, disability, sexual orientation, marital status, or any other class protected by federal, state, or local law.

### EDUCATION

High School: Name \_\_\_\_\_ City \_\_\_\_\_

Circle highest grade completed: High School: 9 10 11 12 College: 13 14 15 16 17

Diploma or GED:  Yes  No

### WORKING SKILLS

If applicable, please check all your skills:

Maintenance  Customer Service  Janitorial Equipment Operation

Janitorial equipment used:

\_\_\_\_\_

\_\_\_\_\_

Describe any other ability, experience or aptitude which you believe would be helpful in your job:

\_\_\_\_\_

\_\_\_\_\_

The position may require lifting (50 lbs.), do you have any weight restrictions?  Yes  No If yes, please list restrictions:

\_\_\_\_\_

### MEDICAL

I understand and agree that I may be required to undergo and successfully pass a screening for alcohol and/or drugs during the hiring process and if employed, as required by the company.

Signature: \_\_\_\_\_

## EMPLOYMENT RECORD INFORMATION

Current/Last Employer: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Salary: \_\_\_\_\_ per \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

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

Duties/Responsibilities:

Co. Phone Number: ( \_\_\_\_\_ )

May we contact?  Yes  No

Current/Last Employer: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Salary: \_\_\_\_\_ per \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

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

Duties/Responsibilities:

Co. Phone Number: ( \_\_\_\_\_ )

May we contact?  Yes  No

Current/Last Employer: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Salary: \_\_\_\_\_ per \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

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

Duties/Responsibilities:

Co. Phone Number: ( \_\_\_\_\_ )

May we contact?  Yes  No

Current/Last Employer: \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Salary: \_\_\_\_\_ per \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

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

Duties/Responsibilities:

Co. Phone Number: ( \_\_\_\_\_ )

May we contact?  Yes  No

## SECURITY

Read this carefully before answering the following questions:

You may answer "No" if your criminal record consists only of one or more of the following: (a) a sealed record on file with the Commissioner of Probation, (b) a case of delinquency or a child in need of services which did not result in a complaint transferred to Superior Court for criminal prosecution, (c) your crimes were misdemeanors and they occurred five or more years ago, or (d) your misdemeanors were limited to a first offense for drunkenness, simple assault, speeding, minor traffic offenses, disturbance of the peace, or affray.

Have you been convicted of a felony or misdemeanor?  Yes  No

If yes, give details including date, location (city) nature of offense and disposition.

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Note: a conviction record will not necessarily be a bar to employment.

## SIGNATURE

### READ CAREFULLY BEFORE SIGNING:

1. I understand that the receipt of this application does not imply that I will be employed.
2. The statements and information furnished by me in this application are true and complete. I understand that I will be subject to immediate dismissal or refusal to hire if at anytime Universal Cleaning discovers any material falsification, omission, or misrepresentation of fact in this application.
3. I authorize Universal Cleaning to conduct a background inquiry to verify the statements and information on this application, other documentation that I have provided, and other areas that may include prior employment, criminal convictions, motor vehicle history, and other reports. I authorize all previous employers or other persons who have knowledge of me, or my records, to release such information to Universal Cleaning. I hereby release any individual, agency, and Universal Cleaning from all claims or liabilities whatever that may arise from the disclosure of such information.
4. I understand that all employees of Universal Cleaning are employees at will. If hired, I will be free to resign at any time. Likewise, Universal Cleaning will have the right to terminate my employment at any time with or without any reason or notice, regardless of the date of payment of my wages or salary. Neither this application, or any other documents given to employees is intended to create, nor should such documents be constructed as creating, an express or implied contract.

My Signature Certifies That I Have Read And Agree With The Above Statements.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

# REFERENCES

Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Professional References

Please list 3 professional references who can verify your work history and performance. References should not be relatives and at least two must have directly supervised you at some time in your work history.

1. Name of Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Company Name and Address \_\_\_\_\_
2. Name of Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Company Name and Address \_\_\_\_\_
3. Name of Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Company Name and Address \_\_\_\_\_

## Personal References

Please list 2 personal references (must not be a relative).

1. Name and Address  
\_\_\_\_\_  
\_\_\_\_\_  
Phone number ( ) \_\_\_\_\_  
Years Acquainted \_\_\_\_\_  
How do you know this individual? \_\_\_\_\_
2. Name and Address  
\_\_\_\_\_  
\_\_\_\_\_  
Phone number ( ) \_\_\_\_\_  
Years Acquainted \_\_\_\_\_  
How do you know this individual? \_\_\_\_\_