



Village Cleaning Service

APPLICATION FOR EMPLOYMENT

We consider application for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

PERSONAL INFORMATION:

DATE _____

NAME _____
First Middle I. (Maiden) Last

ADDRESS _____

TELEPHONE _____ SOCIAL SECURITY # _____

IF UNDER 18 YEARS OF AGE, DO YOU HAVE A WORK PERMIT? YES ___ NO ___

IF NOT A US CITIZEN, DO YOU HAVE THE LEGAL RIGHT TO REMAIN PERMANENTLY AND WORK IN THE US? YES ___ NO ___ ALIEN REG. NO. ___
(Proof of citizenship or immigration status will be required upon employment)

DO YOU HAVE ANY DISABILITY WHICH WOULD SUBSTANTIALLY INTERFERE WITH YOUR ABILITY TO PERFORM THE DUTIES OF THE JOB FOR WHICH YOU HAVE APPLIED? YES ___ NO ___
IF YES, DESCRIBE THE DISABILITY AND EXPLAIN THE WORK LIMITATION AS IT PERTAINS TO THE JOB FOR WHICH YOU HAVE APPLIED.

HAVE YOU EVER BEEN ARRESTED? YES ___ NO ___
IF YES, WHEN? _____ WHY? _____

EMPLOYMENT DESIRED:

POSITION APPLIED FOR: _____

SHIFT YOU CAN WORK: DAY _____ EVENING _____ EITHER _____

FULL TIME _____ PART TIME _____ EITHER _____

DATE YOU CAN START WORKING: _____

ARE YOU CURRENTLY ON "LAY OFF" STATUS AND SUBJECT TO RECALL? _____

HAVE YOU APPLIED TO THIS COMPANY BEFORE? YES ___ NO ___

IF YES, WHEN? _____



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HIGHEST GRADE COMPLETED, CIRCLE ONE: GRADE SCHOOL 6 7 8
HIGH SCHOOL 9 10 11 12 COLLEGE 1 2 3 4

NAME OF LAST SCHOOL ATTENDED _____
VOCATION OR TRADE SCHOOL TRAINING _____

REFERENCES:

GIVE THREE PERSONS NOT RELATED TO YOU:

	NAME	ADDRESS	YRS. KNOWN YOU
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

FORMER EMPLOYERS:

	EMPLOYER	SUPERVISOR	DATES EMPLOYED	POSITION	REASON FOR LEAVING
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

MAY WE CONTACT YOUR PRESENT EMPLOYER AT THIS TIME? YES ___ NO ___

APPLICANT'S STATEMENT:

I UNDERSTAND THAT ANY EMPLOYMENT BY THIS FACILITY WILL BE ON A 30 WORKING DAY PROBATIONARY BASIS. IF EMPLOYED BY VILLAGE CLEANING SERVICE, I AGREE TO ABIDE BY ITS RULES AND REGULATIONS. THE ABOVE INFORMATION IS COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT DISCOVERY OF MISREPRESENTATION OR OMISSION OF FACTS HEREIN WILL BE CAUSE FOR IMMEDIATE DISMISSAL. I AUTHORIZE THIS FACILITY TO CONTACT ANY AND/OR ALL OF MY REFERENCES FOR FULL INFORMATION. I UNDERSTAND THAT A BACKGROUND CHECK WILL BE CONDUCTED WITH MY PERMISSION. I AGREE TO TAKE A PHYSICAL EXAMINATION AT ANY TIME, AT THE REQUEST OF THIS FACILITY AND AGREE THAT THE EXAMINING PHYSICIAN MAY DISCLOSE THE FINDINGS TO THIS FACILITY OR AN AUTHORIZED AGENT OF THIS FACILITY.

APPLICANT'S SIGNATURE

DATE