## **Employment** Quality Commercial Cleaning Service **Application**

Position applying for:

	EMPLO	DYEE INFORMATION				
Name:						
Last	First	Middle				
Telephone:	_ Email:		Alternate te	lephone:		
Address:						
Are you able to perform the est the position with or without act     Yes	ccommodations?  ou older than: heck one)  yment in the U.S.?  sition:  Yes No	<del>-</del>	ansportation?  Ited in Our Emp  Yes  No To Location  is: (check all the	Yes Yes Ves Voloyee Chanc Form L From Locationat apply)	Passengers .ocation	
	EMDI	OYMENT HISTORY				
List most recent employment first here, in the summary following th Employer name and address:		eet of paper if necessary. No			ecommended. End date:	
Pay: \$						
Per:	Supervisor:	Telephone:		<u> </u>	<u> </u>	
Employer name and address:	Position title/duties, ski	lls:		Start date:	End date:	
				Reason for I	eaving:	
Pay: \$						
Per:	Supervisor:	Telephone:				
Employer name and address:	Position title/duties, ski	lls:		Start date:	End date:	
				Reason for I	L eaving:	
Pay: \$	1					
Per:	Supervisor:	Telephone:				
Employer name and address:	Position title/duties, ski	lls:		Start date:	End date:	
			_	Reason for I	L eaving:	
Pay: \$						
Par·	Supervisor:	Telephone:				

Summarize other employment related to this job:

EDUCATION									
	Institution name	Years completed	Field o	of study	Graduate or degree				
High school									
College/university Business/technical									
Additional									
		MIL	ITARY						
Are you a veteran? Duty/specialized training	☐ Yes ng:	☐ No							
SKILLS & QUALIFICATIONS									
Other qualifications such as special skills, abilities or honors that should be considered:									
Types of computers, software, and other equipment you are qualified to operate or repair:									
Professional licenses, certifications or registrations:									
Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention:									
Typing speed:	per minute								
REFERENCES									
List two personal references who are not relatives or former supervisors.									
Name	Address	Т	elephone	Occupation	Years known				
Name	Address	Т	elephone	Occupation	Years known				
		CON	NTACT						
In case of accident or illness, please contact: Name: Daytime phone:									
Address:	ress: Relationship:								
	INF	ORMATION T	TO THE APPLI	CANT					
As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.  If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.									

Signature of Applicant Date

**Equal Employment Opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

Developed at employer request by the Alaska Department of Labor & Workforce Development, Employment Security Division.