

MO-S CLEANING SERVICES, INC. P.O. BOX 113 MACON, GA 31202-0113

Employment Application

		Applican	t Inform	ation				
Full Name:	Il Name:				Date:			
	Last	First			M.I.			
Address:								
	Street Address					Apartment/Unit #		
	City				State	ZIP Code		
Date of Birth:	Driv	er's License No			Exp Date:			
Phone:			Email_					
Date Available: Social Security No.:					Desired Salary:\$			
Position App	olied for:							
Are you a ci	tizen of the United State	YES NO	If no, a	are you	authorized to wor	YES k in the U.S.?	NO	
Have you ev	ver worked for this comp	YES NO any?	If yes,	when?_				
Have you ev	ver been convicted of a f	YES NO [elony?]						
If yes, expla	in:							
		Ed	ucation					
High School	l:	Addres	ss:					
From:	To:	Did you graduat	YES e? 🔲	NO	Diploma::			
College:		Addres	ss:					
From:	To:	Did you graduat	YES	NO	Degree:			
Other:		Addres	ss:					
From:	To:		YES e? □	NO	Degree:			

	References	
Please list three	e references.	
Full Name:		Relationship:
		Phone:
Address:		
		Relationship:
Company		Phone:
Address:		
Full Name:		Relationship:
0		Phone:
Addross:		
	Previous Employment	
Company:		Phone:
Λ d d r a a a :		Supervisor:
Job Title:	Starting Salary:	Ending Salary: <u>\$</u>
Responsibilities	:	
From:	To: Reason for Leaving:_	
May we contact	your previous supervisor for a reference? YES NO □	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:	Ending Salary: \$
Responsibilities	:	
May we contact	your previous supervisor for a reference?	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary: \$	Ending Salary:\$

Rank at Discharge: Type of Discharge: Type of Discharge: If other than honorable, explain: Disclaimer and Signature I certify that my answers are true and complete to the best of my knowledge. Do you have any limitations that would prevent you from doing the job for which you're applying? Yes ☐ or No ☐ If yes, please explain: If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Applicants may be required to undergo drug testing.	Responsibilities:								
Military Service Branch: From: To:	From: To:	Reason for Leaving:							
Branch: To:	May we contact your previous supervisor for a reference?		-						
Rank at Discharge: Type of Discharge:	Military Service								
Disclaimer and Signature I certify that my answers are true and complete to the best of my knowledge. Do you have any limitations that would prevent you from doing the job for which you're applying? Yes □ or No □ If yes, please explain: If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Applicants may be required to undergo drug testing.	Branch:		From:	To:					
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