



APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER

2907 E. 22ND ST. Tucson, AZ 85713

DATE: _____

PERSONAL INFORMATION PLEASE PRINT

NAME (LAST NAME FIRST)		SOCIAL SECURITY NO.	DATE OF BIRTH
PRESENT ADDRESS	CITY	STATE	ZIP CODE
MAILING ADDRESS	CITY	STATE	ZIP CODE
PHONE NO.	REFERRED BY		

Are you eligible to work in the United States? Yes or No

Please circle one: US CITIZEN PERMANENT RESIDENT OTHER (specify):

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF SO, MAY WE INQUIRE YOUR PRESENT EMPLOYER?		
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO WHERE? WHEN?		

PLEASE INDICATE THE HOURS THAT YOU ARE AVAILABLE TO WORK ON EACH OF THESE DAYS

	SUN	MON	TUES	WED	THURS	FRI	SAT
FROM (Hours)							
TO (Hours)							

Should your availability change during the course of your employment, it may impact your employment status based upon our business needs. While we may be able to accommodate your availability limitations upon hire, we do not guarantee that we will be able to support these limitations in the future. Should our business needs change, we may require an adjustment in your availability.

Name and Location of School	Years Attended	Did you Graduate	Subjects Studied
GRAMMAR SCHOOL			
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL			

GENERAL INFORMATION

ARE ANY OF YOUR RELATIVES EMPLOYED BY US? <input type="checkbox"/> YES <input type="checkbox"/> NO		LOCATION
RELATIONSHIP(S):		
HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO (A CONVICTION MAY NOT NECESSARILY BE A BAR TO EMPLOYMENT).		
IF YES, EXPLAIN:		
NAME UNDER WHICH YOU ARE KNOWN TO REFERENCES. (IF DIFFERENT FROM THAT LISTED ABOVE).		

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APPLICATION FOR EMPLOYMENT

WORK EXPERIENCE

BEGIN WITH MOST CURRENT EMPLOYER

COMPANY

PHONE NUMBER

ADDRESS

STREET

CITY

STATE

ZIP

EMPLOYMENT DATES:

POSITION HELD

STARTING SALARY

FINAL SALARY

IMMEDIATE SUPERVISOR

TITLE

MAY WE CONTACT YOUR PRESENT EMPLOYER?

REASON FOR LEAVING

IF NOT, Why?

☐ YES ☐ NO

COMPANY

PHONE NUMBER

ADDRESS

STREET

CITY

STATE

ZIP

EMPLOYMENT DATES:

POSITION HELD

STARTING SALARY

FINAL SALARY

IMMEDIATE SUPERVISOR

TITLE

MAY WE CONTACT YOUR PRESENT EMPLOYER?

REASON FOR LEAVING

IF NOT, Why?

☐ YES ☐ NO

COMPANY

PHONE NUMBER

ADDRESS

STREET

CITY

STATE

ZIP

EMPLOYMENT DATES:

POSITION HELD

STARTING SALARY

FINAL SALARY

IMMEDIATE SUPERVISOR

TITLE

MAY WE CONTACT YOUR PRESENT EMPLOYER?

REASON FOR LEAVING

IF NOT, Why?

☐ YES ☐ NOHAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN ANY POSITION? ☐ YES ☐ NO IF YES, EXPLAIN IN DETAIL.LIST THREE PERSONAL OR
ADDITIONAL

NAME

PHONE #

OCCUPATION

RELATIONSHIP

PROFESSIONAL REFERENCES

(NON-FAMILY MEMBERS)

ACADEMIC ACHIEVEMENTS AND EXTRACURRICULAR ACTIVITIES:

AUTHORIZATION

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFIRM TO THE COMPANY RULES AND REGULATIONS AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY.

DATE

SIGNATURE

FOR OFFICIAL USE ONLY

STARTING DATE

SALARY

DATE JOB OFFERED

EMPLOYEE NO.

POSITION

HIRED BY

NOTES: