

Employment Application

Name:			Date:	
(First) (Middle) Address:	City:	(Last)	State:	Zip:
Home Phone:	. Cell:		Work:	
Can we contact you at work? Yes or No	Best time to co	ontact you at home:		
Earliest date available for work:		Position Applyin	g:	
Employment desired (Circle all that apply)	Part-time	Full-time	Daytime	Evening/Night
If part-time, how many hours per day/night	t would you pref	fer?		
What time are you available to start cleaning	ng each day/eve	ening?		
What is your desired wage per hour?				
How were you referred to this position?				
Have you ever been employed with us befo	ore? Yes or No	If yes, date:		
Please list any reason(s) that would preven	t you from janit	orial labor (i.e. liftin	ց, standing, mopլ	ping, sweeping,
cleaning etc.). If so, please explain.				
List any acquaintances or relatives employ	ed by Clean + S:	afe I I C·		
List arry acquaintances or relatives employ	ed by cican + 50			
Have you ever been convicted of a felony?	Yes or No If ye	es, please explain:		
List prior work experience:				
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Company Name	Individual supervis	sor's name		contact #
Company Name	Individual supervis	sor's name		contact #
Company Name	Individual supervis	sor's name		contact #
Please add any additional comments that y	ou feel would b	e important in our c	onsideration of y	our application:
I certify that my answers are true and compemployment, I understand that false or mistrelease. I authorize you to verify all inform	sleading informa	ation in my applicat	• •	