

APPLICATION FOR EMPLOYMENT

AN
EQUAL
OPPORTUNITY
EMPLOYER

All statements made by applicants for employment on this application form will be carefully checked for accuracy. We offer equal employment opportunities to all persons without regard to race, religion, age, sex, national origin, familial status or disability. The use of this form does not mean there are positions open and does not obligate us in any way. This application will remain on active file for a period of _____ months from the date of application.

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PERSONAL INFORMATION

Name (Print) _____ Home or Nearest Phone _____
(Last Name) (First Name) (Middle Name)

Present Address _____
(Number) (Street)

SSN _____ / _____ / _____
(City) (State) (Zip)

Email Address _____

Are you over the age 18? Yes No If no, employment is subject to verification that you are of minimum legal age.

What languages can you read, speak and write fluently? _____

Are you a citizen of the United States? Yes No If not a citizen can you provide Form I-151 or Form I-94 as proof that you can legally be employed in the United States? Yes No

Do you intend to remain permanently in the United States? Yes No

Positions applied for _____ How soon could you report to work? _____

Type of employment Full-Time Part-Time Temporary Rate of pay expected \$ _____ /per hour

What days and hours if part time? Days of the week _____ Hours _____ a.m. to _____ p.m.
M-Tu-W-Th-Fr

EDUCATION

TYPE OF SCHOOL	NAME/ADDRESS OF SCHOOL	COURSES MAJORED IN	CIRCLE LAST YEAR COMPLETED	DID YOU GRADUATE
Elementary			5 6 7 8	
High School			9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No
College		Degree		<input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY

Have you applied for a job with us before? Yes No Have you ever worked for us before? Yes No

How did you come to apply? Employment Referral Former Employee High School Recruitment College Recruitment Newspaper Ad Walk-In Other _____

Have you ever been bonded? Yes No Have you ever been refused bond? Yes No
 If so, state reason and date _____

Have you ever been discharged or requested to resign from a position? Yes No
 If so, explain _____

Does present employer know you plan an employment change? Yes No

Why do you desire to make a change? _____

Have you ever held a position of trust (handling money or confidential material)? Yes No

How much time have you lost from work during the past year? _____

PRIOR WORK RECORD (start with most recent or present employer)

1.

Name, Address & Phone of most recent employer		Telephone Number
Immediate Supervisor (Name & Position)	Date Hired	Starting Pay Rate
Your Job Title & Duties	Date Left	Last Pay Rate
Reason for Leaving		

2.

Name, Address & Phone of employer		Telephone Number
Immediate Supervisor (Name & Position)	Date Hired	Starting Pay Rate
Your Job Title & Duties	Date Left	Last Pay Rate
Reason for Leaving		

3.

Name, Address & Phone of employer		Telephone Number
Immediate Supervisor (Name & Position)	Date Hired	Starting Pay Rate
Your Job Title & Duties	Date Left	Last Pay Rate
Reason for Leaving		

SERVICE IN UNITED STATES ARMED FORCES

Have you served in the United States Armed Forces? Yes No If yes, date active duty started _____

Date duty ended? _____ Which Branch of Service? _____ Current Status _____

Starting rate? _____ Ending rate? _____ Final Rank? _____

What were your duties? _____

REFERENCES

(do not list relatives or former employers)

Name	Address	Telephone
Name	Address	Telephone
Name	Address	Telephone

JOB APPLICANT'S AGREEMENT AND CERTIFICATION

"I certify that the information given by me on this application is true in all respects and I agree that if I am employed and it is found to be false in any way, I may be subject to dismissal without notice, if and when discovered. I authorize the use of any information in this application to verify my statement, and I also authorize past employers, all references and any other persons to answer all questions asked concerning my ability, character, reputation and previous employment record. I release all such persons from any liability or damages because of having furnished such information. I further agree, if employed, that I am to work faithfully and diligently, to be careful and to avoid accidents, to come to work promptly, and I am not to be absent for any reason without prior notice to my supervisor, and that my employment is terminable at the will of either the employee or employer."

Signature of Applicant

Date of Application

PROFESSIONAL

PROPERTY MANAGEMENT

**CONSENT FOR BACKGROUND AND REFERENCE
CHECK FOR EMPLOYMENT**

I, _____ hereby give my consent for Professional Property Management, Inc., to check the references listed on my Application for Employment and to perform a background check, including but not limited to, a credit and criminal background check.

(All inquiries are to be used solely for the purpose of consideration of available employment.)

Name

Today's Date (MM/DD/YYYY)

Address

Date of Birth (MM/DD/YYYY)

City, State, Zip Code

Social Security Number

Driver's License Number

If you have lived at your current address less than two (2) years, please provide your previous address.

Address

City, State, Zip Code

Signature



MAINTENANCE CHECK-LIST

**ONLY COMPLETE THIS PAGE IF APPLYING FOR SITE MANAGEMENT OR MAINTENANCE POSITION
(PLEASE CHECK OFF THE ITEMS YOU ARE CABLE OF PERFORMING)**

KITCHEN

REFRIGERATORS

- Level Refrigerator
- Replace Compressors
- Replace Gaskets
- Unclog Drain Lines

RANGE

- Install Hood Fan
- Level Range
- Repair Burners
- Repair Range Clock
- Replace Burners
- Replace Elements

OTHER KITCHEN

- Caulking
- Install Garbage Disposals
- Locate/Repair Leaks
- Repair Faucets
- Repair Garbage Disposals
- Replace Aerators
- Replace Faucets
- Replace Rubber Throats
- Replace Sinks
- Replace Sprayers
- Replace Washers

LIGHT FIXTURES

- Replace Ballast
- Replace Fixtures
- Replace Fluorescent Bulbs

BATHROOM

TOILETS

- Adjust Tank Float
- Pull Toilet/Replace Wax Ring
- Replace Flappers
- Replace Tank Balls
- Replace Tank Kit
- Unclog Toilet/Snake Line

OTHER BATHROOM

- Clean Shower Heads
- Install Medicine Cabinet
- Install Shower Doors
- Repair Exhaust Fans
- Repair Sink Faucet
- Repair Tub Faucets
- Replace Exhaust Fans
- Replace Shower Doors
- Replace Shower Heads
- Replace Sink Faucet
- Replace Tub Faucets

LAUNDRY & HOT WATER HEATER

- Install Handicap Grab Bars
- Install Paper Holder
- Install Towel Bars
- Install Water Heater
- Replace Elements
- Replace Hinges
- Replace Paper Holder
- Replace Sink
- Replace Towel Bars
- Replace Turn & Drop Stoppers
- Replace Washers
- Replace Washing Machine Belts
- Replace Washing Machine Hoses

CARPETING

- Install Carpet/Pad
- Shampoo Carpet
- Take Up Carpet/Pad

ROOF & GUTTERS

- Install Gutter Guards
- Re-Nail
- Repair Soffit & Facia
- Replace Gutters
- Re-Shingle
- Tar

EXTERIOR

- Concrete Repairs
- Install Railings
- Paint
- Paint Parking Stripes
- Repair Chain Link Fence
- Repair Patio Gates
- Repair Patio Lights
- Repair Screens
- Repair Vinyl Siding
- Repair Wooden Fence
- Replace Aluminum Siding
- Replace Screens
- Replace Windows

ELECTRICAL

- Install Breakers
- Install Ceiling Fans
- Install GFI Outlets
- Install Light Fixtures
- Install Switches
- Install Telephone Jacks
- Replace Doorbells
- Replace Electric Eyes
- Replace Smoke Alarm Batteries
- Replace Smoke Alarms

HEATING - VENTILATION - A/C

- Flush Out Line
- Re-light Pilot Light
- Repair Pop-Off Valves
- Replace Thermostat

GENERAL MAINTENANCE

- Attic Insulation
- Install Door Latches - Exterior
- Install Door Latches - Interior
- Install Mini-Blinds
- Install Screen Door
- Pest Control
- Repair Cabinet Doors
- Repair Countertops
- Repair Drywall
- Repair Floor Tiles
- Repair Screen Door
- Repair Weather-stripping
- Replace Closet Door Guides
- Replace Doorknobs
- Replace Door Locks
- Replace Drawer Guides
- Replace Mailbox Locks
- Replace Shelving
- Replace Trim Molding
- Set Pre-Hung Door
- Varnish

PHYSICAL DUTIES

- Lifting up to 50 lbs
- Bending, Stooping
- Stretching or Reaching over head

GENERAL CARPENTRY - List

**DO YOU HAVE ANY LIMITATIONS THAT WOULD PREVENT YOU FROM PERFORMING ANY OF THE DUTIES ABOVE
IF SO PLEASE LIST BELOW**

EMPLOYEE SIGNATURE _____