FINAL TOUCH CLEANING, LLC.

APPLICATION FOR EMPLOYMENT

Date			
Last Name	First Name	Middle Name	
Social Security #	Cell Phone	Home Phone	
Address:			
-		Zip Code:	
-	k in the U.S.?		
Have you ever been emplo	oyed under another name?		
drug test. Have you ever b		nust pass a criminal back-ground check and ontest to a felony crime? If yes, explain when,	
Date Available:			
Some projects require alter	rnative work days and hours.		
Are you available to work	nights? Are you ava	ilable to work weekends?	
How were you referred to			
	ORY (list all positions in chronological of	order starting with the most recent position)	
1) Employer	Date Hired	Date Separated	
Address	Title & Name of Supervisor		
Reason for Leaving:			
2) Employer	Date Hired	Date Separated	
Address	Title & Name of Supervisor		
Reason for Leaving:			
3) Employer	Date Hired	Date Separated	
Address	Title & N	Title & Name of Supervisor	
Reason for Leaving:			

WORK RELATED REFERENCES 1) Name______ Phone #_____ 2) Name Title Phone # Address 3) Name______ Phone #_____ Address Please list any special skills, professional knowledge, licenses, certificates, or achievements that would support your application: DRIVING RECORD Do you have a valid driver's license? YES or NO Driver's License #: _____ State: _____ State: List any restriction on Driver's License: If you will be operating any Final Touch vehicles, we will be required to verify and check your driving record. READ CAREFULLY BEFORE SIGNING! I hereby affirm that the information provided in this application (and accompanying resume, if any) is true and complete. I also agree that any false, wrong or incomplete information or omissions may disqualify me from consideration for contract labor employment or continued contract labor employment. I agree to submit to any required background checks, driving record checks, and drug screenings and understand that the results of such checks and screenings may disqualify me from consideration of contract labor employment or continued contract labor employment. I authorize a thorough investigation of the information provided herein, agree to cooperate in such investigation and release from all liability or responsibility all persons or entities requesting or supplying such information.

Date: _____

Applicant Signature: