



EMPLOYMENT APPLICATION

Date of application: _____

NAME: _____ (please print)

ADDRESS: _____
Street City State Zip

PHONE: _____ SOCIAL SECURITY #: _____

Date available to start: _____ DATE OF BIRTH: _____

1. Do you have a current valid Driver's License? YES NO
2. Do you have your own transportation? YES NO
3. Are you eligible for employment in this country (USA)? YES NO
4. During the past 10 years, have you been convicted of, or have you pled guilty or no contest to, a felony offense? YES NO *If Yes, please explain:

WORK EXPERIENCE: (Last job)

From: To:	Employer	Phone:
Job Title:	Address:	
Supervisor & title:	Nature of the work & responsibilities:	
Reason for leaving:		Hourly Rate /Salary:

(Prior to last job)

From: To:	Employer	Phone:
Job Title:	Address:	
Supervisor & title:	Nature of the work & responsibilities:	
Reason for leaving:		Hourly Rate/ Salary:

Any additional skills including supervision skills, training, or information that you wish to bring to the employer's attention.

Information to the applicant:

- 1. As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on the application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.**
- 2. In-home service and residential delivery companies must perform a complete criminal history background check through DPS or a private vendor on any employees or associates sent by the companies into customers' homes (including attached garages or construction areas next to homes), or else confirm that the persons sent into customers' homes are licensed by an occupational licensing agency that conducted such a criminal history check before issuing the license.**
- 3. If necessary for employment, you may be required to; supply your birth certificate or other proof of authorization to work in the U.S., have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms.**

I understand and agree to the information shown above:

Signature: _____ **Date:** _____

Printed name: _____