



EMPLOYMENT APPLICATION

APPLICANT INFORMATION				
Last Name		First	M.I.	Date
Street Address			Apartment/Unit #	
City		State	ZIP	
Phone		E-mail Address		
Date Available	Social Security No. & Date of Birth (xx/xx/xxxx)		Desired Salary & Date Available	
Position Applied for				
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>				
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?				
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain				
Do you have a valid Drivers License? YES <input type="checkbox"/> NO <input type="checkbox"/>		Do you have reliable transportation? YES <input type="checkbox"/> NO <input type="checkbox"/>		

EDUCATION				
High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

PREVIOUS EMPLOYMENT (STARTING WITH MOST RECENT)				
Company		Phone ()		
Address		Supervisor		
Job Title		Starting Salary \$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>				

Company		Phone ()		
Address		Supervisor		
Job Title		Starting Salary \$	Ending Salary \$	
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>				

Company		Phone	()	
Address		Supervisor		
Job Title		Starting Salary	\$	Ending Salary \$
Responsibilities				
From	To	Reason for Leaving		
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>				

REFERENCES

Please list 2 professional or personal references. Other than supervisors listed above

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER, AUTHORIZATION & RELEASE

I have carefully read and understand this Disclosure, Authorization and Release form. By my signature below, I consent to the release of consumer reports and/or investigative consumer reports to Hand-I-Maids, Inc. in conjunction with my job application. I also authorize disclosure to Hand-I-Maids, Inc. and/or to the background check vendor of information concerning my employment history, earning history, education, credit history, credit capacity and credit standing, motor vehicle history and standing, criminal history, and all other information Hand-I-Maids, Inc. deems pertinent by any individual, corporation or other private or public entity, including without limitation the following: employers; learning institutions, law enforcement agencies; federal, state and local courts; the military; credit bureaus; motor vehicle records agencies; and other applicable sources. I hereby release and hold the vendor and Hand-I-Maids, Inc., its officers, directors, employees, and trustees harmless from any and all liability with respect to the consumer reports, investigative consumer reports, investigations, verifications, and/or the use of any information relevant to my employment. I understand that if Hand-I-Maids, Inc. hires me, my consent will apply throughout my employment to the extent permitted by law, unless I revoke or cancel my consent by sending a signed letter or statement to Hand-I-Maids, Inc., I also understand that, to the extent allowed by law, information contained in my job application or otherwise disclosed by me before, during, or after my employment, if any, may be used for the purpose of obtaining consumer reports and/or investigative consumer reports. I understand that providing any false information or omitting any material information on my application materials or in the interview process will be sufficient grounds for rejection of the application, or termination of employment whenever discovered.

Signature	Date
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QUESTIONNAIRE

Have you ever worked for a professional cleaning service? If so, describe your experience.

What skills do you possess that would set you apart from the crowd?

What do you like about cleaning homes?

What motivates you?

Do you have an objection to the company running a criminal background check?

Why would you be an asset to our company?

Any other information you would like us to know while we consider your application for employment.