PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE



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	APPLICANTS	MAY BE TESTED FOI	R ILLEGAL DRUGS			
PLEASE COMPLETE F	PAGES 1-5.		DATE			
Name						
	Last		Middle		Maiden	
Present address						
	Street Address	City	State	Zip Cod	9	
How long						
If under 18, please list a	age					
Position applied for (1) and salary desired (2) (Be specific)			Days/hours available to work No Pref Thur Mon Fri Tue Sat Wed Sun			
How many hours can yo	ou work weekly?		Can you work nights	?		
Employment desired	□FULL-TIME ONLY	□PART-TIME O	NLY □FULL- C	R PART-TIM	E	
When available for work	</td <td></td> <td></td> <td></td> <td></td>					
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF Y		MAJOR & DEGREE	
High School		,				
College						
Bus. or Trade School						
Professional School						
HAVE YOU EVER BEE	N CONVICTED OF A CR	IME? □ No	☐ Yes			
	of conviction(s), nature of imposed, and type(s) of r		onviction(s), how recei	ntly such offer	nse(s) was/were	
, (-)	, , , , , , , , , , , , , , , , , , , ,					

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APPLICATION FOR EMPLOYMENT DO YOU HAVE A DRIVER'S LICENSE? ☐ Yes ☐ No What is your means of transportation to work? Driver's license number ___ _____ State of issue ____ □ Operator □ Commercial (CDL) □ Chauffeur Expiration date How many? _____ Have you had any accidents during the past three years? How Many? _____ Have you had any moving violations during the past three years? **OFFICE ONLY** ☐ Yes ☐ Yes Word ☐ Yes WPM **Typing** ☐ No WPM 10-key ☐ No Processing □ No PC Personal ☐ Yes Other Computer ☐ No Mac Skills _____ Please list two references other than relatives or previous employers. Name _____ Name _____ Position _____ Position Company ___ Company ____ Address _____ Address Telephone (___) Telephone () An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

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APPLICATION FOR EMPLOYMENT **MILITARY** HAVE YOU EVER BEEN IN THE ARMED FORCES? ☐ Yes ☐ No ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? ☐ Yes ☐ No Specialty Date Entered Discharge Date Work Please list your work experience for the past five years beginning with your most recent job held. **Experience** If you were self-employed, give firm name. Attach additional sheets if necessary. Name of employer Name of last **Employment dates** Pay or salary Address supervisor City, State, Zip Code From Start Phone number To Final Your last job title Reason for leaving (be specific) List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. **Employment dates** Name of employer Name of last Pay or salary Address supervisor City, State, Zip Code From Start Phone number То Final Your Last Job Title Reason for leaving (be specific) List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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APPLICATION FOR EMPLOYMENT

Work	Please list your work experience for the past five years beginning with your most recent job held.
experience	If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From	Start
		То	Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, company.	advancements or pro	motions while you wo	rked at this

Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From To	Start Final
	Your last job title		

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by 1 Source Janitorial (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of 1 Source Janitorial, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and 1 Source Janitorial may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant_____ Date: _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.
By selecting the "I Accept" button, you are signing this Agreement electronically. You agree your electronic signature is the legal
equivalent of your manual signature on this Agreement. By selecting "I Accept" you consent to be legally bound by this Agreement's
terms and conditions
□ I Accept