Summit Cleaning LLC Application for Employment

Date:					
What time did you arrive?					
What time was your appointment?					
We are committed to a policy of Equal Employment Opprotected basis, including, but not limited to, race, age, ancestry, physical or mental disability, veteran status, o	color, r	eligion, sex, natio	nal origin,	citizenship,	
PERSONAL BACKGROUND					
LAST NAME:	MI	FIRST NAME: _			
PRESENT ADDRESS:	CITY: _		ST:	ZIP:	
MAILING ADDRESS:	CITY: _		ST:	ZIP:	
PREVIOUS (If less than 5 years at present address) ADDRESS:	CITY: _		ST:	ZIP:	
HOME TELEPHONE PERSON TO CONTA NUMBER: CASE OF EMERGEN	ACT IN NCY:		EMERGE PHONE	ENCY CONTAC #:	:Т
CELL #:	EMAIL:				
DRIVER'S LICENSE #::		STATE ISSUED	:		
HOW DID YOU HEAR ABOUT THIS JOB?					
DO YOU KNOW OR ARE YOU RELATED TO ANYON	IE WHO	WORKS FOR SI	UMMIT CL	EANING LLC?	
Driving is a requirement of the job. Is your license valid	?	Yes	N	lo	
Do you have full time access to a vehicle?		Yes	N	lo	
ls your vehicle in good working condition?		Yes	N	lo	
s the vehicle covered by liability insurance?		Yes	N	lo	
If yes, what company?					
Policy Number:	-				
Make of Vehicle:	Model	:	Year:		

Are you able, at the time of employment, to submit Verification of your legal right to work in the U.S.?* *Verification and completion of the I-9 form must be submitted			Yes no later than 3 busine	No ess days after hire.
Are you able to lift 2	5 pounds or more?		Yes	No
	iculty standing, bending, or kn erforming necessary cleaning		Yes	No
Are you allergic to H	lousehold Chemicals?		Yes	No
Are you allergic to ca	ats and/or dogs?		Yes	No
Are you afraid of cat	s and/or dogs?		Yes	No
What hours are you	available to work on the follow	wing weekday	s?	
MONDAY TU	JESDAY WEDNESDA	Y THURSE	DAY FRIDAY	
TO	TOTO	TO_	TO	_
If hired, when can yo	ou start work?			_
Are you presently er	nployed?		Yes	No
If "yes" may we cont	act your present employer?		Yes	No
Which of the following	ng categories of jobs have you	u had?		
House Cleanir	ng Hotel/M	lotel	Resta	urant
Fast Food Janitorial		Sales		
Homemaker Manufacturing Service				
Other (explain	1)			
	CE three employers, starting with ary any verified work performe			oyment. You may
Date Mo/Year	Name and Address Of Employer	Salary	Position	Reason for Leaving
From:				

To:

Supervisor's			Tel	ephone			
Name:				mber:			
From:							
То:							
Supervisor's			Ты	ephone			
Name:				mber:			
From: To:							
Supervisor's Name:				ephone mber:			
Name.			INU	ilibel.			
,					1		
EDUCATIONAL BACKGROUND		Name & School Location		Circle C	Highest Grade Completed	M	ajor Area of Study
					-		
High School				9 10	11 12 / GED		
College					1 2 3 4		
Trade, Business or Graduate School	r						
Have you ever been convicted of a criminal offense? Yes No							
If yes, explain:							
Have you ever been bo	onded	! ?			Yes		No
Has your driver's licens	se eve	er been suspended?			Yes	_	No
If yes, explain:							

Note: Due to the security-sensitive nature of the job, all employees are required to be bonded. As a matter of policy, the company conducts a police background and driving record check on any applicant in consideration of hiring.

PERSONAL REFERENCES

List the names of three persons not related to you, whom you have known at least three years.

NAME:	OCCUPATION:	PHONE:				
ADDRESS:	CITY,ST, ZIP:	YEARS KNOWN:				
NAME:	OCCUPATION:	PHONE:				
ADDRESS:	CITY,ST, ZIP:	YEARS KNOWN:				
NAME:	OCCUPATION:	PHONE:				
ADDRESS:	CITY,ST, ZIP:	YEARS KNOWN:				
Check ONLY one box: ☐ I NEED this job ☐ I WANT this job (hint: there is no "right or wrong" answer, we just want to know you better in order to fill your schedule) Why are you interested in working for Summit Cleaning LLC?						
Why do you think you are a good fit for this company?						
How long do you see yourself working here?						

PLEASE READ CAREFULLY

AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

I, the undersigned, do hereby certify that the information provided by me for the purpose of employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal.

I authorize Summit Cleaning LLC, and any security agency service working for them, to disclose orally and in writing the results of this verification process and/or interview to the designated authorized representative of this company.

I have read and understand this release and consent, and authorize the background verification. I authorize persons, schools, current and former employers, personal references and other organizations and Agencies to provide Summit Cleaning with all information that may be requested, and to conduct a verification, as deemed necessary by this Company to fulfill the job requirements, with regards to my motor vehicle records, credit history as allowed by EEOC and ECOA, and to receive any criminal history record information pertaining to me which may be in the files of any Federal, State or Local criminal justice agency in Colorado or any other States. I hereby release all the persons and Agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original. All results will be proprietary and will be kept CONFIDENTIAL and disclosed orally and in writing only to the designated authorized representatives of this Company and its Clients.

I do hereby agree to forever release, discharge and indemnify Summit Cleaning and their associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any agency arising from the retrieving and reporting of information.

APPLICANT:

Name, Typed or Printed	Date:			
Signature			_	
Address	D.C).B	State	
Maiden Name:				
Please provide name, lo	ocation and date of the	school(s) attend	ded:	
High School	Location	Date of G	ate of Graduation	
Further Education	Location	Date of G		