

APPLICATION FOR EMPLOYMENT

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. **PLEASE PRINT**, except for the signature are of the application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

LAST NAME	FIRST NAME	MIDDLE NAME
HOME ADDRESS	CITY	STATE
EMAIL	CELL PHONE NUMBER	SSN

All positions require that you pass a credit, criminal background check, and/or drug & alcohol testing.

I agree to any background checks and/or drug & alcohol testing: **Yes** ☐ **No** ☐

Desired Position: CLEANING TECHNICIAN ☐ LEAD PERSON ☐ WORKING SUPERVISOR ☐

Are you seeking: **Full-time** ☐ **Part-time** ☐

Are you currently employed? **Yes** ☐ **No** ☐ If yes, where: _____

Days/Shift Working: _____

Do you plan on continuing employment if hired? **Yes** ☐ **No** ☐

Date Available to Begin Work: _____

Total Hours You Can Work Weekly: _____

AVAILABILITY

(List the start and end time for each day you can work.)

Days of week available:	Hours you can work:
MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	

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Are you 21 years of age, or older? Yes ☐ No ☐

(If hired, you may be required to provide proof of age.)

Do you read, write, and speak fluent English? Yes ☐ No ☐

If hired, can you provide proof you are eligible to work in the U.S.? Yes ☐ No ☐

Do you have any physical restrictions on any of these job duties? Yes ☐ No ☐ *(Check ALL that apply below.)*

Lifting? ☐ Bending? ☐ Usage of Hands, Arms, Legs, or Other Body Parts? ☐
Required to work with another? ☐

Do you foresee any impairments, physical or mental, that would substantially limit your ability to perform the job requirements for which you are applying? Yes ☐ No ☐

If Yes, Please Explain: _____

Have you ever applied here before? Yes ☐ No ☐

If yes, when? _____

Have you ever been employed by Faith Janitorial Corporation? Yes ☐ No ☐

If yes, when? _____ Position Held: _____

Do you have any friends or relatives working for Faith Janitorial Corporation? Yes ☐ No ☐

If so, please list: _____

Have you ever been convicted of any law violation? Yes ☐ No ☐

(Include any plea of "guilty" or "no contest." Exclude minor traffic violations.)

If yes, give details: _____

Do you have a valid driver's license? Yes ☐ No ☐

Driver's License Number: _____ Class of License: _____ State Licensed In: _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes ☐ No ☐

If yes, give details: _____

Do you have your own, reliable transportation? Yes ☐ No ☐

If yes, what's the year, make and model of your vehicle: _____

Have you ever been fired from a job or asked to resign? Yes ☐ No ☐

If yes, Please explain: _____

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LIST PAST 3 EMPLOYMENT STARTING WITH MOST RECENT

Employer Name, Address, Zip Code	Start Date	End Date	Supervisor Name	Phone Number	Position Held	Rate of Pay	Reason For Leaving

Provide 3 References who are not related to you:

Name	Phone Number	Relationship to you

What length of commitment can you give to this job, if hired? _____

Why are you interested in this position with Faith Janitorial Corporation? _____

Please explain the responsibilities you think are included in the position applying for: _____

When cleaning a building, please list the order you would perform the following tasks

(Number from 1 to 6 with 1 being the first task you would complete and 6 being the last.)

Cleaning Order (1-6)	Cleaning Task
	MOPPING
	VACUUMING
	EMPTY TRASH
	GLASS-MIRRORS
	SWEEPING
	DUSTING
	FURNITURE-SURFACES

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Do you have any current or previous professional commercial cleaning experience?
If so, how long?

Experience Type:	Years <i>(Length of Experience)</i>	Months <i>(Length of experience)</i>
Carpet cleaning and equipment?		
Deep cleaning?		
Floor care and equipment?		
Industrial cleaning?		
Medical cleaning?		
Office cleaning?		
Post construction cleaning?		
Vent cleaning?		
Wall cleaning?		
Window Cleaning?		

Do you have access to the internet at home? Yes ☐ No ☐

Do you have a smart phone or another portable device that allows you to access apps? Yes ☐ No ☐

Can you be reached on your cell phone after work hours? Yes ☐ No ☐

PLEASE READ AND CHECK EACH STATEMENT CAREFULLY BEFORE SIGNING:

☐ I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

☐ I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand I may be required to successfully pass a drug & alcohol screening examination. I hereby consent to a pre- and/or post-employment drug & alcohol screen as a condition of employment, if required. I understand that if I am extended an offer of employment, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

☐ I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD, AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

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☐ I have read, understand, and by my signature consent to these statements:

Applicant Signature

Printed Name

Date Signed