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Employment Application

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Position Applied for:	Date of Review:			
How were you referred to us:				
Applicant Data:				
Full name (Last, First, Middle):				
Address:				
City:	State:		Zip:	
Phone: Mobile/Pag				
Email:				
Date Available to Start:				
Social Security #: Salary	Salary Requirement:			
If you are under 18 and we require a work permit, car furnish one?	n you	Yes:	No:	
If no, please explain:				
	Yes:		No:	
If yes, when?				
Are you a citizen of the United Sates?			No:	
If not, are you legally allowed to work in the United St	tates?	Yes:	No:	
Type of employment desired:				
Full-Time: Part-Time: Temporary:		Seasonal:		
Have you ever pled "guilty," "no contest," or been con of a crime?	victed	Yes:	No:	
If yes, give dates and details:				
Answering "yes" to these questions does not cons	stitute a	n automatio	c rejection for	

employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Driver's license number if applicable to position: Window Tech/Power Washer

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	State:
Summarize Your Special Skills or Qualification	ations:
Previous Employment (begin with most re	cent position):
Dates of Employment: From	to
Position(s) Held:	
Firm:	
Address:	
Phone:	
Supervisor:	Title:
Responsibilities:	
Starting Salary and Title:	
Ending Salary and Title:	
Reason for leaving:	
May we contact this employer as a reference	?
Dates of Employment: From	to
Position(s) Held:	
Firm:	
Address:	
Phone:	
Supervisor:	Title:
Starting Salary and Title:	
Ending Salary and Title:	
Reason for leaving:	
May we contact this employer as a reference	?
Dates of Employment: From	to
Position(s) Held:	
Firm:	
Address:	
Phone:	
	Title:
Responsibilities:	
Starting Salary and Title:	
Ending Salary and Title:	

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Reason for leaving:

May we contact this employer as a reference?

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision.

I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.

I understand that false or misleading information given in my application or interview(s) may result in discharge.

Your birth date and driver's license numbers are required to pull a criminal background check and your driving record.

DOB: _____

Signature of Applicant:

Date: