



# APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Applications are received and employees are hired without regard to race, creed, color, sex, religion, age national origin, marital status, physical or mental handicap, disability, veterans status and citizenship status. The receipt of this application does not mean that job openings exist and does not obligate us in any way. We appreciate your interest in our organization.

Date \_\_\_\_\_

### PERSONAL INFORMATION

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Present Address \_\_\_\_\_ Home or nearest phone \_\_\_\_\_

No. Street City State Zip

How long have you lived at above address? \_\_\_\_\_

Previous address \_\_\_\_\_ How long? \_\_\_\_\_

No. Street City State ZIP

Are you over the age of 18?  Yes  No If no, employment is subject to verification that you are of minimum legal age.

Are you legally eligible to work in the U. S.? \_\_\_\_\_

### EMPLOYMENT INFORMATION

Position applying for? \_\_\_\_\_ Date available for work? \_\_\_\_\_

Shift Preference  1st  2nd  3rd What salary do you expect? \_\_\_\_\_

Type of employment?  Full Time  Part Time  Temporary

What days and hours, if part time? Days? \_\_\_\_\_ Hours? From \_\_\_\_\_ To \_\_\_\_\_

Have you ever applied for a job with us before?  Yes  No

Have you ever worked for us before?  Yes  No

Have you ever been bonded?  Yes  No Have you ever been refused bond?  Yes  No If so, state reason and date \_\_\_\_\_

Does your present employer know of your plans to change employment?  Yes  No Why do you desire to make a change? \_\_\_\_\_

Have you ever held a position of trust (handling money or confidential material)?  Yes  No

How many days have you been absent from work in the past year? \_\_\_\_\_

Do you have steady transportation to work?  Yes  No

Have you ever been discharged or asked to resign?  Yes  No

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work here? \_\_\_\_\_

State any limitations on your working hours or days: \_\_\_\_\_

### EDUCATION INFORMATION

SCHOOLING	YEARS COMPLETED	DEGREE REC. AND MAJOR SUB.	NAME OF SCHOOL	LOCATION	DID YOU GRADUATE ?
GRAMMER OR HIGH SCHOOL					
TRADE BUS. OR CORRESPONDENCE COLLEGE					
GRADUATE SCHOOL					

**MILITARY SERVICE RECORD**

Were you in the U. S. Armed Forces?  Yes  No If yes, what Branch? \_\_\_\_\_

Dates of duty: From \_\_\_\_\_ To \_\_\_\_\_ Rank at Discharge \_\_\_\_\_

List duties in the Service including special training \_\_\_\_\_

**PRIOR WORK RECORD ( Start with most recent or present employer)**

1. Name and Address of most recent Employer. \_\_\_\_\_ Telephone No. \_\_\_\_\_

Immediate Supervisor (Name and Position) \_\_\_\_\_ Date Hired \_\_\_\_\_ Starting Rate \_\_\_\_\_

Your Job Title & Duties \_\_\_\_\_ Date Left \_\_\_\_\_ Last Rate \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

2. Name, Address of most recent Employer. \_\_\_\_\_ Telephone No. \_\_\_\_\_

Immediate Supervisor (Name and Position) \_\_\_\_\_ Date Hired \_\_\_\_\_ Starting Rate \_\_\_\_\_

Your Job Title & Duties \_\_\_\_\_ Date Left \_\_\_\_\_ Last Rate \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

3. Name, Address of most recent Employer. \_\_\_\_\_ Telephone No. \_\_\_\_\_

Immediate Supervisor (Name and Position) \_\_\_\_\_ Date Hired \_\_\_\_\_ Starting Rate \_\_\_\_\_

Your Job Title & Duties \_\_\_\_\_ Date Left \_\_\_\_\_ Last Rate \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact the employers listed above? \_\_\_\_\_ If not, indicate by number which one(s) you do not wish contacted.

**REFERENCES**

(Do Not List Relatives Or Former Employers)

Name \_\_\_\_\_ Address \_\_\_\_\_ Occupation \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Occupation \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Occupation \_\_\_\_\_

The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit bureaus of your choice.

In making this application for employment, I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigative consumer report.

I understand that employment at this organization is "at will" and includes no guarantee, contract, or promise of employment for any specified length of time.

all such persons from any liability or damages on account of having furnished such information.

I authorize the use of any information in this application to verify my statements, and I authorize the past employers, doctors, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



# Employment Contingency Requirements

I \_\_\_\_\_ fully understand that my employment and/or continued employment with Apex Pest Control Inc., is contingent upon reports of my Driving Record, Worker's Compensation Record, Drug Screening, and Criminal Background Check.

I also understand that unfavorable results on the above investigations, or a determination of uninsurability, can, may or will end my possible or continued employment with Apex Pest Control Inc.

Date \_\_\_\_\_ Signed \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_  
\_\_\_\_\_ Manager Signature

Please make a copy of this signed page for the potential candidate and retain the original for our records. This form needs to be completed at the time of application. Thank you.