

**Service Employees  
APPLICATION FOR  
EMPLOYMENT**

**Central Midlands Cleaning, LLC**

**Application is valid the month you  
apply and two months thereafter.**

This application form is intended for use in evaluating your qualification for employment. It is not an employment contract. You must answer all questions completely. Please be advised Central Midlands Cleaning is an Equal Opportunity Employer. All persons shall have the opportunity to be considered for employment without regard to their race, color, religion, national origin, ancestry, alien age or citizenship status, age, disability or handicap, sex, marital status, veteran status, sexual orientation, arrest record, or any characteristic protected by applicable federal, state or local laws. Central Midlands Cleaning will endeavor to make reasonable accommodation to the known physical or mental limitations of a qualified applicant or employee with a disability unless the accommodation would impose an undue hardship on the operation of our business. If you require such assistance to complete this form, to participate in an interview or to perform your job, please let us know. Pursuant to the Immigration Reform Act of 1986, all applicants who are offered employment must produce documents establishing their identity and authorization for employment in the United States. These documents must be produced no later than seventy-two (72) hours after employment begins. In addition, all new hires will be required to verify their employment authorization under oath by signing INS Form 1-9.

**PERSONAL DATA**

<b>NAME:</b> _____	<b>SOCIAL SECURITY NUMBER:</b> _____
<b>PRESENT ADDRESS:</b> _____	
<b>PRESENT TELEPHONE:</b> (____) _____	<b>WHAT HOURS DO YOU DESIRE:</b>
<b>MESSAGE TELEPHONE :</b> (____) _____	___ FULL TIME ___ TEMPORARY ___ NIGHT ONLY
___ PART TIME ___ DAY ONLY ___ DAY OR NIGHT	

<b>POSITION DESIRED:</b> _____	<b>DATE AVAILABLE:</b> _____	<b>SALARY REQUESTED:</b> _____
<input type="checkbox"/> YES <input type="checkbox"/> NO Are you under 18 years of age? <input type="checkbox"/> YES <input type="checkbox"/> NO Can you, after employment, verify that you have a legal right to work in the U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO Do you speak, read or understand any languages other than English which could assist you in the performance of your work duties? If so indicate the language: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO Have you ever been convicted of a felony that has not been deleted, sealed, or impounded? If so, when _____ _____ A felony conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe the nature of the offense for which you were convicted, the circumstances surrounding the commission of the offense, and your subsequent rehabilitation: _____ _____ <input type="checkbox"/> YES <input type="checkbox"/> NO Do you have any information regarding a change of name, use of an assumed name or nickname, necessary to enable us to check on your work and educational record? If yes, please provide other names: _____ _____ <input type="checkbox"/> YES <input type="checkbox"/> NO Are you a Veteran of the U.S. Military Service? If yes, please provide Branch and dates of service: _____ _____ <input type="checkbox"/> YES <input type="checkbox"/> NO If you are required to operate a Company vehicle, or your own vehicle on Company business, do you have a valid driver's license? If so, please provide: License Number _____ State _____ Exp. Date: _____ <input type="checkbox"/> YES <input type="checkbox"/> NO Do you have reliable means to get to work?		

**EDUCATION AND TRAINING**

**You may exclude all information that indicates age, sex, race, religion, color, national origin or disability with regard to your Education and Training.**

Please indicate the highest educational level you have achieved by circling one of the following:

Elementary/Primary 1 2 3 4 5 6 7 8	High School 9 10 11 12 GED	College or University 1 2 3 4	Graduate School 1 2 3 4
Additional Education/Training /Skills _____			

**EMPLOYMENT HISTORY**

Please list your employment history for the past **five** years (or at least **three** employers). Start with your present status and note any periods in which you were **not** employed.

Employer:	Dates of Employment: From: To:	Salary / Wage: Start: Final:
Address:		Telephone Number: ( )
Job Title:	Immediate Supervisor:	May we Contact: yes or no
Basic duties and responsibilities:		Reason for terminating:
-		
Employer:	Dates of Employment: From: To:	Salary / Wage: Start: Final:
Address:		Telephone Number: ( )
Job Title:	Immediate Supervisor:	May we Contact: yes or no
Basic duties and responsibilities:		Reason for terminating:
-		
Employer:	Dates of Employment: From: To:	Salary / Wage: Start: Final:
Address:		Telephone Number: ( )
Job Title:	Immediate Supervisor:	May we Contact: yes or no
Basic duties and responsibilities:		Reason for terminating:
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**GENERAL INFORMATION**

To assist us in the processing of your application for employment, please complete the following questions regarding your contact with Central Midlands Cleaning.

YES  NO I have previously applied for a position with Central Midlands Cleaning. If yes, please indicate the date of your previous Application for Employment \_\_\_\_\_

I have previously been employed by Central Midlands Cleaning. If yes, please indicate the dates of your previous service with Central Midlands Cleaning.

YES  NO From \_\_\_\_\_ To \_\_\_\_\_

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY; THEY CONSTITUTE THE CONDITIONS FOR EMPLOYMENT WITH CENTRAL MIDLANDS CLEANING LLC.**

I have read and fully understand the questions asked in this application. I certify that all answers given by me are true, accurate and complete. I also certify the information contained in the accompanying resume, if any, are true, accurate, and complete.

I understand any material misrepresentation and/or omission of any fact from this application, resume, or during any interview for employment will be cause for denial of employment, or if employed, cause for immediate dismissal.

I authorize Central Midlands Cleaning to contact all my employment references, end to inquire about, investigate and obtain copies of any records which relate to me from my former employers and educational institutions I have attended. I hereby release Central Midlands Cleaning and all affiliated entities, as well as any person or institution that provides Central Midlands Cleaning with any information about me, from any and all liability whatsoever resulting from any such inquiry, investigation or communication. I understand that additional highly detailed background inquiries may be required as a condition of employment (a release authorization will be required upon employment).

I understand Central Midlands Cleaning is a federal contractor and has committed to providing for its employees a drug & alcohol free workplace. If required by Central Midlands Cleaning, consistent with a collective bargaining agreement, if applicable, I agree to submit to a pre-employment drug & alcohol screening, and agree, if employed to submit to a periodic testing, and to execute such authorizations as may be required to provide release to Central Midlands Cleaning of all test results. If the results of these tests indicate a positive reaction I understand that I will be denied employment, and if employed, subject to established disciplinary procedure which may include termination.

If hired, I agree to abide by all of the rules and regulations of Central Midlands Cleaning. I understand and agree that nothing in this application shall constitute a contract or guarantee of employment for a specific period of time. I also understand that if employed, my employment may be terminated with or without cause, and with or without notice at any time, at the will of Central Midlands Cleaning or me, consistent with the terms of a collective bargaining agreement, if applicable.

I understand that Central Midlands Cleaning and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits, or other terms and conditions of employment.

If employed, I agree to abide by such policies and procedures as Central Midlands Cleaning publishes for employees.

I also understand that this application will be kept active the month I apply and for a period of two months. Thereafter, I will be required to complete a new application.

**Signature of Applicant Date**

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