

# Contractor Application

- All information obtained within this application will be held in strict confidence, subject to applicable law.
- Please complete all applicable sections and sign the last page.
- Please print clearly.

We will not discriminate because of sex, age, race, physical disability, religion, ethnicity, marital status, ancestry, or place of origin.



## 1

### APPLICANT INFORMATION

S.S.#: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Telephone: (      ) \_\_\_\_\_ Mobile: (      ) \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State Issued: \_\_\_\_\_ Expires: \_\_\_\_\_

Auto Insurance Co.#: \_\_\_\_\_ Policy #: \_\_\_\_\_ Expires: \_\_\_\_\_

List any relevant experience: \_\_\_\_\_  
\_\_\_\_\_

Position applying for:  Full-Time  Part-Time \_\_\_\_\_ Date available to start: \_\_\_\_\_

Hours available to work: \_\_\_\_\_ Days available:  M  Tu  W  Th  F  S  Su

Are you legally entitled to work in the United States?  Yes  No \_\_\_\_\_

Are you willing to submit to a drug test?  Yes  No \_\_\_\_\_

Are you willing to submit to a background check?  Yes  No \_\_\_\_\_

Have you ever been convicted of a felony? (If yes, please explain):  Yes  No \_\_\_\_\_  
\_\_\_\_\_

Are you bondable?  Yes  No \_\_\_\_\_ When is the best time to contact you? \_\_\_\_\_

## 2

### EDUCATIONAL BACKGROUND

Highest level of education completed: \_\_\_\_\_

Are there any skills, experience, or other qualifications which you feel would assist you in performing the duties of the position for which you have applied?  
\_\_\_\_\_  
\_\_\_\_\_

**3****List below your last two employers, starting with the most recent.**

Employer's Name: \_\_\_\_\_

Reason for Departure: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone: (      )

Position(s) Held: \_\_\_\_\_

Duties: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

May we contact this employer? (If not, state brief reason):  Yes  No

Employer's Name: \_\_\_\_\_

Reason for Departure: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Telephone: (      )

Position(s) Held: \_\_\_\_\_

Duties: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

May we contact this employer? (If not, state brief reason):  Yes  No**4****Special skills or training:** \_\_\_\_\_

Please list any precluding physical limitations: \_\_\_\_\_

**5****False information given or implied on an application form is grounds for immediate dismissal without further notice.**

I hereby state that all information provided is accurate and may be verified by you. I agree that I may be discharged if the maid service at any time learns of falsification or material omission in the information provided on this application form and related documents. The maid service may contact my former employers. All references are hereby authorized to release all information which they may have relevant to my employment with them. I hereby release the maid service, its affiliates, successors, and assigns, and all references from any liability that might be claimed because of information provided by such references.

I agree that I will follow all Company policies, rules, and procedures. I understand that the maid service reserves the right to add, change, and/or delete any policies, procedures, work rules, and/or beliefs at any time.

I agree to make myself available for random drug testing. I have never been convicted of a felony and I have no criminal charges pending against me.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NO CONSIDERATION OF EMPLOYMENT WILL BE GIVEN TO ANY APPLICANT WHO DOES NOT SIGN THE ABOVE STATEMENT.**