APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER All statements made by applicants for employment on this application form will be carefully checked for accuracy. We offer equal employment opportunities to all persons without regard to race, religion, age, sex, national origin, familial status or disability. The use of this form does not mean there are positions open and does not obligate us in any way. This application will remain on active file for a period of _____ months from the date of application.

AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION							
Name (Print)(Last Name) (First Name)	(Middle Name)	Home or Near	rest Phone			
Present Address	(Number)	(Street)					
(01)	(9,)		SSN	/	/		
(City)	(State)	(Zip)					
Are you over the age 18? Yes No If no, employment is subject to verification that you are of minimum legal age.							
What languages can	you read, speak and write fluently?						
	the United States? Yes No If ted States? Yes No	not a citizen can you provi	de Form 1-151 or	Form 1-94 as proof that	you can legally be		
Do you intend to ren	nain permanently in the United States?	☐ Yes ☐ No					
Positions applied for			How soon cou	ald you report to work?			
Type of employment	Full-Time Part-Time	Temporary Rate of pay	expected\$	/per hour	-		
What days and hours	s if part time? Days of the week	M-Tu-W-Th-Fr	Hours	a.m. to	p.m.		
		EDUCATION					
TYPE OF SCHOOL	NAME/ADDRESS OF SCHOOL	COURSES M	AJORED IN	CIRCLE LAST YEAR COMPLETED	DID YOU GRADUATE		
Elementary				5 6 7 8			
High School				9 10 11 12	☐ Yes ☐ No		
College		Degree			☐ Yes ☐ No		
EMPLOYMENT HISTORY							
Have you applied for	r a job with us before? Yes N	o Have you ever worked t	for us before?	Yes No			
How did you come to apply? Employment Referral Former Employee High School Recruitment College Recruitment Newspaper Ad Walk-In Other							
Have you ever been bonded? Yes No Have you ever been refused bond? Yes No If so, state reason and date							
Have you ever been discharged or requested to resign from a position? Yes No If so, explain							
Does present employer know you plan an employment change? 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 much time have you lost from work during the past year?							

PRIOR WORK RECORD (start with most recent or present employer)

1.		_		
Name, Address & Phone of most recent employer			Telephone Number	
Immediate Supervisor (Name & Position)		Date Hired	Starting Pay Rate	
Your Job Title & Duties	Your Job Title & Duties		Last Pay Rate	
Reason for Leaving				
2.				
Name, Address & Phone of employer	Telephone Number			
Immediate Supervisor (Name & Position)		Date Hired	Starting Pay Rate	
Your Job Title & Duties		Date Left	Last Pay Rate	
Reason for Leaving				
3. Name, Address & Phone of employer			Telephone Number	
Immediate Supervisor (Name & Position)		Date Hired	Starting Pay Rate	
Your Job Title & Duties		Date Left	Last Pay Rate	
Reason for Leaving				
SE Have you served in the United States Armed Force		ED STATES ARMED FO If yes, date active duty starte		
Date duty ended?	duty ended?Which Branch of Service?		Current Status	
Starting rate?Ending rate?		I	rinal Rank?	
What were your duties?				
		EFERENCES tives or former employers)		
Name	Address	uves of former employers)	Telephone	
Name	Address		Telephone	
Name	Address		Telephone	
"I certify that the information given by me on this appli to dismissal without notice, if and when discovered. I a references and any other persons to answer all questions any liability or damages because of having furnished so	cation is true in all resp authorize the use of any s asked concerning my a uch information. I furth	information in this application to ability, character, reputation and p her agree, if employed, that I am	TION yed and it is found to be false in any way, I may be subject verify my statement, and I also authorize past employers, all revious employment record. I release all such persons from o work faithfully and diligently, to be careful and to avoid visor, and that my employment is terminable at the will of	
Signature of Applicant			Date of Application	



CONSENT FOR BACKGROUND AND REFERENCE CHECK FOR EMPLOYMENT

I,	hereby give my consent for
Professional Property Management, Inc., to check	the references listed on my Application for
Employment and to perform a background check, in	cluding but not limited to, a credit and criminal
background check.	
(All inquiries are to be used solely for the purpose of co	onsideration of available employment.)
Name	Today's Date (MM/DD/YYYY)
Address	Date of Birth (MM/DD/YYYY)
City, State, Zip Code	Social Security Number
	Driver's License Number
If you have lived at your current address less than two ((2) years, please provide your previous address.
	<u>_</u>
Address	
City, State, Zip Code	<u> </u>
Signat	ture





MAINTENANCE CHECK-LIST

ONLY COMPLETE THIS PAGE IF APPLYING FOR SITE MANAGEMENT OR MAINTENANCE POSITION (Please Check Off The Items You Are Capable Of Performing)

ITCHEN	LAUNDRY & HOT WATER HEATER	HEATING - VENTILATION - A/C
REFRIGERATORS	Install Handicap Grab Bars	Flush Out Line
Level Refrigerator	Install Paper Holder	Re-light Pilot Light
Replace Compressors	Install Towel Bars	Repair Pop-Off Valves
Replace Gaskets	Install Water Heater	Replace Thermostat
Unclog Drain Lines	Replace Elements	GENERAL MAINTENANCE
RANGE	Replace Hinges	Attic Insulation
Install Hood Fan	Replace Paper Holder	Install Door Latches - Exterior
Level Range	Replace Sink	Install Door Latches - Interior
Repair Burners	Replace Towel Bars	Install Mini-Blinds
Repair Range Clock	Replace Towel Bars Replace Turn & Drop Stoppers Replace Washers	Install Mini-Blinds Install Screen Door Pest Control
Replace Burners	Replace Washers	Pest Control
Replace Elements	Replace Washing Machine Belts	Repair Cabinet Doors
OTHER KITCHEN	Replace Washing Machine Hoses	Repair Cabinet Doors Repair Countertops
Caulking	CARPETING	Repair Drywall
Install Garbage Disposals	Install Carpet/Pad	Repair Floor Tiles
Locate/Repair Leaks	Shampoo Carpet	
Repair Faucets		Repair Screen Door Repair Weather-stripping
Repair Garbage Disposals	Take Up Carpet/Pad ROOF & GUTTERS	Replace Closet Door Guides
Danlace Aerotors	Inctall Cutter Cuarde	Replace Door Knobs
Replace Faucets		Replace Door Locks
Replace Rubber Throats		
Replace Sinks	Replace Gutters	Replace Drawer Guides Replace Mailbox Locks
Replace Sprayers	Re-Shingle	Replace Shelving
Replace Washers	Tar	Replace Trim Moldings
LIGHT FIXTURES	EXTERIOR —	Set Pre-Hung Door
Replace Ballast	Concrete Repairs	Varnish
Replace Fixtures	Install Railings	PHYSICAL DUTIES
Replace Fluorescent Bulbs	Paint	Lifting up to 50 lbs
ATHROOM	Paint Parking Stripes	Bending, Stooping
TOILETS	Repair Chain Link Fence	Stretching or Reaching over head
	Perpair Datio Cates	GENERAL CARPENTRY - List
Adjust Tank Float	Repair Patio Gates	GENERAL CARFENTRY - LIST
Pull Toilet/Replace Wax Ring	Repair Patio Lights	<u> </u>
Replace Flappers	Repair Screens	
Replace Tank Balls	Repair Vinyl Siding	<u> </u>
Replace Tank Kit	Repair Wooden Fence Replace Aluminum Siding	<u> </u>
Unclog Toilet/Snake Line	Replace Aluminum Siding	<u> </u>
OTHER BATHROOM	Replace Screens	_
Clean Shower Heads	Replace Windows	<u> </u>
Install Medicine Cabinet	ELECTRICAL	
Install Shower Doors	Install Breakers	
Repair Exhaust Fans	Install Ceiling Fans	
Repair Sink Faucet	Install GFI Outlets	
Repair Tub Faucets	Install Light Fixtures	_
Replace Exhaust Fans	Install Switches	
Replace Shower Doors	Install Telephone Jacks	
Replace Shower Heads	Replace Doorbells	
Replace Sink Faucet	Replace Electric Eyes	
Replace Tub Faucets	Replace Smoke Alarm Batteries	
	Replace Smoke Alarms	
DO YOU HAVE ANY LIMITA	ATIONS THAT WOULD PREVENT YOU FROM PE	ERFROMING ANY OF THE DUTIES ABOVE
	IF SO PLEASE LIST BELOW	
EMPLOYEE SIGNATURE		
Z.III E O I EL DIGIMITURE		

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