Allen Maintenance Inc. Employment Application

| Pre-Employment Question | Equal Opportunity | Equal Opportunity Employer | |
|---------------------------|---------------------------|----------------------------|---------------|
| Date: | | | |
| First, Middle, Last Name: | | | |
| Address: | | | |
| City, State, Zip: | | | |
| - | | | |
| | | | |
| Social Security # | | | |
| Date of Birth: | | | |
| | | | |
| | | | |
| Position desired: | | | |
| Position: | Date You | Salary Desired: | |
| 1 Oshion. | Can Start: | Galary Desired. | |
| Are You Employed | If so, may we inquire | Ever applied with | |
| Now? | with your present | this company | |
| Yes No No | Employer? Yes No No | | No 🔲 |
| What skills do you have | Were you ever terminated | Do you have your | |
| to meet the position | from a job? | own transportation? | |
| You desire to hold? | | | |
| | Yes No | Yes | lo 🗆 |
| | Please explain reason for | D 1 11111 | |
| Please explain: | termination? | Do you have a valid driv | er's license! |
| - | | | |
| | | Yes 🗆 | No 🗆 |
| | | | |
| | | | |
| Education History: | | · | |
| | | | |
| N ₂ | me & Address Years Atten | ded/Did You Subject of | of Study |

| | Name & Address | Years Attended/Did You Graduate? | Subject of Study |
|----------|----------------|-------------------------------------|------------------|
| High | | | |
| School: | | | |
| | | | |
| College: | | | |
| | | | |
| | | | |
| Trade or | | | |
| Business | | | |
| school: | | | |

| | | | <u> </u> |
|------------------------------------|----------------------------|----------------------|--------------------|
| | | | |
| | | | |
| General Informati | on: | | |
| Subject of special | | | |
| study/research work: | | | |
| U.S. Military or Naval Service: | | | |
| Rank: | | | |
| | | | |
| | | | |
| | List below Last Four Forme | | |
| Employer: | Address/ City/ Zip | Position held/Salary | Reason for Leaving |
| Name: | Street: | | |
| | | | |
| Start Date: | | | |
| End Date: | City: | | |
| | Zip: | Salary: | |
| Name: | Street: | | |
| | | | |
| Start Date: | | | |
| | City: | | |
| End Date: | | Salary: | |
| Name: | Zip: Street: | | |
| Name. | Succi. | | |
| 0 D . | | | |
| Start Date: | | | |
| End Date: | City: | 0.1 | |
| | Zip: | Salary: | |
| Name: | Street: | | |
| | | | |
| Start Date: | | | |
| End Date: | City: | | |
| End Date: | | Salary: | |
| References: | Zip: | | |
| | | | |
| Name | Address | Business | Years Known |
| First: | Street: | | |
| | | | |
| • | City: | | |
| Last: | | | |

| Phone: | Zip: | |
|--------|---------|--|
| First: | Street: | |
| Last: | City: | |
| Phone: | Zip: | |
| First: | Street: | |
| Last: | City: | |
| Phone: | Zip: | |
| First: | Street: | |
| Last: | City: | |
| Phone: | Zip: | |

Authorization_

"I certify that the facts conveyed on this appliation are true and complete to the best of my knowledge and understand that, if employeed, falsefied statements on this application shall be ground for dismissal.

I authorize investigation of all statements contained herein and references and employeers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company for any liability for any damage that may result from utilization of such information.

I also understand that no representative of the company has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Dsiabilities Act (ADA) and other relevant federal and state laws.

I understand the a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal laws, the company will provide me with a written notice regarding the use of these reports and will also obtain a seprate written authorization from me to consent to these reports. I also understand a poor credit history or conviction will not automatically result in disqualification from employment."

In complaince with federal laws, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

| Date: | Signature: | |
|-----------------------|-------------------|--------------|
| | Do Not Write Belo | ow This Line |
| Date: | Interviewed By: | |
| | | |
| | | |
| Neatness: | | Character: |
| Personality: | | Ability: |
| Hired: | | Start Date: |
| What Department: | | Wages: |
| Position: | | |
| Approved: | | , |
| Employment Manager: _ | | |
| | | |
| General Manager: | | |