



Employment Application 9-2019

An Equal Opportunity Employer

APPLICANT NOTE: We do not discriminate on the basis of race, color, religion, national origin, sex, age or disability. It is our intention that all qualified applicants be given equal opportunity and that

selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **Please print.** In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Today's Date: _____ How were you referred to Dependable Cleaners? _____

Have you ever applied here before? Yes No. If yes, when? _____

Were you ever employed here? Yes No. If yes, when? _____

Job Applying for: Counter Shirt Presser Pant Presser Silk Finisher Driver Assembler Manager Office Other

Location(s) you are applying for: _____

Are you willing to travel to other branches? Yes No. If yes, where? Downtown North Southeast Other _____

Are you seeking: <input type="radio"/> Full-time <input type="radio"/> Part-time <input type="radio"/> Temporary work	Indicate your days & hours of availability	Day	Sun.	Mon.	Tue.	Wed.	Thu.	Fri.	Sat.	When can you start?
		From								
		To:								

PERSONAL INFORMATION

Name: _____

Home Address: _____

(City)

(State)

(Zip)

Telephone: _____

(Primary)

(Secondary)

(Other)

Are you 16 years of age or older? Yes No (If hired, you may be required to submit proof of age)

Social Security Number: _____ (If hired, can you submit proof you are eligible to work in the U.S.? Yes No)

Have you been known under any other names? Yes No. If Yes, give names: _____

For driving jobs only: Do you have a valid driver's license? Yes No.

Driver's License Number: _____ Class of License _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes No.

If Yes, give details: _____

EDUCATION

Please circle highest grade completed. 7 8 9 10 11 12 13 14 15 16 16+

Type of School	City/State	Graduated?	Degree/Area of Study?
High School		<input type="radio"/> Yes <input type="radio"/> No	
College		<input type="radio"/> Yes <input type="radio"/> No	
Graduate School		<input type="radio"/> Yes <input type="radio"/> No	
Other		<input type="radio"/> Yes <input type="radio"/> No	

Please list any other skills, licenses or certificates that may be job-related or that you feel would be of value to this job or company. _____

EMPLOYMENT HISTORY

Please note your application will not be considered unless every question in this section is answered. Since we will make every effort to contact previous employers, **the correct telephone numbers of past employers are critical.** Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

MOST RECENT EMPLOYER

Phone: (____) _____

Are you currently working for this employer? Yes No. If yes, may we contact? Yes No

Company Name _____ City _____ State _____

From _____ **To** _____
Dates Employed _____ Your Job Title _____ Supervisor's Name _____

List Major Job Duties _____

_____ Per _____
Salary (hour, week, month) _____ Reason for Leaving _____

Phone: (____) _____

SECOND MOST RECENT EMPLOYER

Company Name _____ City _____ State _____

From _____ **To** _____
Dates Employed _____ Your Job Title _____ Supervisor's Name _____

List Major Job Duties _____

_____ Per _____
Salary (hour, week, month) _____ Reason for Leaving _____

Phone: (____) _____

THIRD MOST RECENT EMPLOYER

Company Name _____ City _____ State _____

From _____ **To** _____
Dates Employed _____ Your Job Title _____ Supervisor's Name _____

List Major Job Duties _____

Have you ever been fired from a job or asked to resign? Yes No. If yes, please explain: _____

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

- I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.
- I understand that the employer may request an investigative consumer report from a consumer-reporting agency. This report may include information as to my characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer-reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.
- I authorize the investigation of any or all statement contained in this application and also authorize any person, school, current employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.
- I understand that if I am extended an offer of employment, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.
- I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre-and/or post-employment drug screen as a condition of employment, if required.
- I understand and that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without cause and with or without notice. I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____