



Certified Small & Woman Owned Business

## Application For Employment

**UNDERPRESSURE, INC.**

*You Cook...We'll Clean*

**Danny Poythress**

Specializing in Kitchen Grease Exhaust  
& Tiled Floor Cleaning

P: (804)769-8035

F: (804)769-0867

Danny@underpressure-inc.com

www.underpressure-inc.com

## Personal Information

Full Name: \_\_\_\_\_

SSN: \_\_\_\_\_

DOB: \_\_\_\_\_

Present Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Please list two references other than relatives.**

Name \_\_\_\_\_

Name \_\_\_\_\_

Relation \_\_\_\_\_

Relation \_\_\_\_\_

Telephone \_\_\_\_\_

Telephone \_\_\_\_\_

DO YOU HAVE A CURRENT, VALID DRIVER'S LICENSE?  Yes  No

HAVE YOU HAD ANY MOVING VIOLATIONS WITHIN THE PAST 3 YEARS:  Yes  No HOW MANY: \_\_\_\_\_

HAVE YOU HAD ANY ACCIDENTS WITHIN THE PAST 3 EYARS:  Yes  No HOW MANY: \_\_\_\_\_

What is your means of transportation to work? \_\_\_\_\_

Driver's license number \_\_\_\_\_

State of issue \_\_\_\_\_

**HAVE YOU EVER BEEN CONVICTED OF A CRIME OR FELONY?**  No  Yes

If yes, please explain. \_\_\_\_\_

**HAVE YOU EVER HAD A CLAIM FOR WORKMAN'S COMPENSATION FROM AN EMPLOYER?**  No  Yes

If yes, please explain: \_\_\_\_\_

**HAVE YOU EVER CLAIMED DISABILITY OR UNEMPLOYMENT FROM A PREVIOUS EMPLOYER?**  No  Yes

If yes, please explain: \_\_\_\_\_

**Work Experience**

Please list your work experience beginning with your most recent job held.  
 If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City / County Phone number	Name of last supervisor	Employment dates	Pay or Salary
		From To	Start Final
	Your Last Job Title:		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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**My signature below certifies that information provided is true.**

Underpressure, INC reserves the right to perform a criminal history and credit history report on each applicant.  
 Underpressure, INC reserves the right to have employees submit to random drug tests.

**Signature of applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

