

EMPLOYMENT APPLICATION

PLEASE COMPLETE THE APPLICATION CAREFULLY. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. ALL ANSWERS WILL BE TREATED CONFIDENTIALLY.

Date:							
Last Name:		First:			Middle Initial:		
Street Address:				Apartment/Unit #:			
City:			State:		Zip:		
Home Phone:				Mobile Phone:			
How long at this address:		Years:			Months:		
Email address:							
Emergency Contact Person: (Name):			Phone:			Relation:	
Desired Position:			Date Available:			Desired Salary:	
Hours available:	Mon	Tues	Wed	Thurs	Fri	Sat	
What geographic area are you interested in working?						County:	
Have you previously applied for employment with McCann Janitorial?					Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you have a valid Driver's License?					Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Can you work weekends?					Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Can you work holidays?					Yes <input type="checkbox"/>	No <input type="checkbox"/>	
How did you find out about us?		Referral <input type="checkbox"/>	Ad <input type="checkbox"/>	Internet <input type="checkbox"/>	Yellow Pages <input type="checkbox"/>	Expo <input type="checkbox"/>	

EDUCATION:

High School:			Address:				
From:	To:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>			Degree:		
College:			Address:				
From:	To:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>			Degree:		
Other:			Address:				
From:	To:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>			Degree:		

EMPLOYMENT HISTORY: {LIST THE MOST RECENT (3) PROFESSIONAL EMPLOYERS}

Company:		Phone: ()	
Address:		Supervisor:	
Job Title:	Starting Salary \$	Ending Salary \$	
Responsibilities:			
From:	To:	Reason for leaving:	
May we contact this employer for a reference?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Company:		Phone: ()	
Address:		Supervisor:	
Job Title:	Starting Salary \$	Ending Salary \$	
Responsibilities:			
From:	To:	Reason for leaving:	
May we contact this employer for a reference?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Company:		Phone: ()	
Address:		Supervisor:	
Job Title:	Starting Salary \$	Ending Salary \$	
Responsibilities:			
From:	To:	Reason for leaving:	
May we contact this employer for a reference?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

LIST THREE (3) REFERENCES:

Full Name:	Relationship:
Company:	Phone: ()
Address:	

Full Name:	Relationship:
Company:	Phone: ()
Address:	

Full Name:	Relationship:
Company:	Phone: ()
Address:	

OTHER QUALIFICATIONS:

List special job related skills or training:
Are you able to perform the job related functions of the position you are applying for? Yes <input type="checkbox"/> No <input type="checkbox"/>
Why are you interested in this position?
If someone were asked to tell us something about you, what might they say?

LEGAL:

Have you had an Employment Background Investigation within the last 2 years? Yes <input type="checkbox"/> No <input type="checkbox"/>
Can you provide us with a copy? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are there any criminal charges pending against you? Yes <input type="checkbox"/> No <input type="checkbox"/> Month/Year:
If yes, please explain:
Have you ever been convicted of a crime (felony or misdemeanor), pled no contest to a criminal charge, accepted probation before judgment, or had any similar dispositions of a criminal charge filed against you? Yes <input type="checkbox"/> No <input type="checkbox"/> Month/Year:
If yes, please explain:
Are you a citizen of the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, are you authorized to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>

DISCLAIMER AND SIGNSATURE:

I understand that this employer follows an “employment at will” policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state and federal laws; this “employment at will” policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the President of McCann Janitorial Services, Inc. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand that McCann Janitorial Services, Inc. will thoroughly investigate my work and personal history and verify all data given on this application, on related papers and in interviews. I authorize all individuals, schools and firms’ names therein, except my current employer if so noted, to provide any information requested about me and I release them from all liability for damage in providing this information.

Under Maryland Law, an employer may not require or demand any applicant for employment or any employee, to submit or take a polygraph, lie detector, or similar test or examination as a condition of employment or continued employment. Any employer who violates this provision is guilty of a misdemeanor and subject to a fine not to exceed \$100.00.

I certify that all statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Signature

Date