



Application for Employment

Position applying for (select all that apply):

- Housekeeping _____
- Commercial Cleaner _____
- Floor specialist _____

GENERAL INFORMATION:

All questions must be answered for consideration.

First Name:		Middle Name:		Last Name:		Social Security Number:	
Home Address:				Apt:	City:		State: Zip:
Primary Contact #:			Current Work #: _____		Date of Birth:		
			May we contact __YES__ __NO__				
Are you legally authorized to work in the United States? __YES__ __NO__				Have you ever been employed with a cleaning company? __YES__ __NO__			
				If Yes, list company _____			
Do you have a valid driver's license? __YES__ __NO__				How did you hear about us? _____			
If Yes, State _____ ID# _____							
Have you ever been convicted of, pled guilty to, or pled no contest to, a crime, excluding misdemeanors and traffic violations? __YES__ __NO__ If yes, please explain							

RECENT EMPLOYMENT INFORMATION:

Employer:		Address:		City, State and Zip:	
Job Title:	Name of Supervisor:	Telephone:	Dates Worked: From: _____ To: _____		
If current, may we contact? __Yes__ __No__	Beginning Salary/Wage: \$ _____/Hour or Year	Ending Salary/Wage: \$ _____/Hour or Year	Reason for Leaving:		
Employer:		Address:		City, State and Zip:	
Job Title:	Name of Supervisor:	Telephone:	Dates Worked: From: _____ To: _____		
If current, may we contact? __Yes__ __No__	Beginning Salary/Wage: \$ _____/Hour or Year	Ending Salary/Wage: \$ _____/Hour or Year	Reason for Leaving:		



Employer:		Address:		City, State and Zip:
Job Title:	Name of Supervisor:	Telephone:	Dates Worked: From: _____ To: _____	
If current, may we contact? ___Yes ___No	Beginning Salary/Wage: \$/_____/Hour or Year	Ending Salary/Wage: \$/_____/Hour or Year	Reason for Leaving:	
Employer:		Address:		City, State and Zip:
Job Title:	Name of Supervisor:	Telephone:	Dates Worked: From: _____ To: _____	
If current, may we contact? ___Yes ___No	Beginning Salary/Wage: \$/_____/Hour or Year	Ending Salary/Wage: \$/_____/Hour or Year	Reason for Leaving:	
U.S. Military: Branch of Service: _____		Date Entered: _____		Highest Rank: _____
Discharged: _____				
List Special Skills, Training or Relevant Experience:				

EDUCATION:

High School: Name:		
City, State & Zip:		
Did you graduate?	Diploma or Degree Received:	GPA:
College: Name:		
City, State & Zip:		
Did you graduate?	Diploma or Degree Received:	GPA:
Other: Name:		
City, State & Zip:		
Did you graduate?	Diploma or Degree Received:	GPA :



PERSONAL REFERENCE:

Name:		
Address:	Daytime Phone #:	How long have you known him/her?

PROFESSIONAL REFERENCES:

Name:		
Address:	Daytime Phone #:	How long have you known him/her?
Name:		
Address:	Daytime Phone #:	How long have you known him/her?

Please read the section below carefully before signing:

I certify that the statements made in this application are true and correct to the best of my knowledge and authorize Personal Touch to investigate all statements made from all prior employers, references and law enforcement agencies. I hereby release all parties from all liability from any damage that may result from furnishing the same.

I acknowledge that Personal Touch reserves the right to modify company policies at any time, without prior notice. These policies do not create any promises or contractual obligations between Personal Touch and its employees.

I understand that my employment is at will. This means that I am free to terminate my employment at any time for any reason, with or without cause, and that Personal Touch retains the same rights.

I understand that any false answers or statements or misrepresentations by omission made by me as part of my application, will be sufficient for rejection of my application or for my immediate discharge should one be discovered after I am employed.

Signature Date _____

Personal Touch is an Equal Opportunity Employer. Any person applying for a position with Personal Touch will be considered for the position for which they have applied without regard to race, color, religion, sex, age, national origin, disability, sexual orientation or veteran status.



The following questions are required in order for your application to be considered. Please answer questions completely and to the best of your ability.

**all applicants*

Describe a time when you were faced with a stressful situation that demonstrated your coping skills.

**housekeeping only*

Give a detailed example of how you would go about cleaning a home. Mention floor types, and specific things in the home that you would pay special attention.

**commercial cleaners only*

Describe in your own words what you feel are the most immediate cleaning needs of a commercial establishment.