



Employment Application

Please complete the entire application.

It is the policy of Right The 1st Time to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

1. Applicant Information:

Applicant Full Name: _____

Home Address: _____

City/State/ZIP: _____

Years at the address: _____ E-mail: _____

Telephone: _____

Social Security Number: _____

Driver's License (State/Number): _____

Job Position Applied For Cleaning Technician

Salary Desired: \$ _____ per _____

Are you at least 18 years old: Yes _____ No _____

Do you have reliable transportation that you have daily use to? Yes _____ No _____

Can you provide proof of car insurance: Yes _____ No _____

Are you available to work Monday – Friday 8 a.m. until 5 p.m.? Yes _____ No _____

If offered employment, when would you be available to begin work? _____

If hired, are you able to submit proof that you are legally eligible for employment in the United States?

Yes _____ No _____

Are you able to perform the essential functions of the job position without accommodations?
Yes _____ No _____
Are you able to stand on your feet for 8 hours per day? Yes _____ No _____
Are you able to kneel and bend without restraint? Yes _____ No _____
Are you able to lift 25 pounds? Yes _____ No _____
Are you able to write and speak English fluently? Yes _____ No _____
Do you have a cellphone that you have access to daily? Yes _____ No _____
Are you aware that a nationwide background check and urine drug test is required prior to employment?
Yes _____ No _____

2. Applicant Employment History (*List your current or most recent employment first*)

Employer Name: _____
Supervisor Name: _____
Address: _____
City/State/Zip: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

Employer Name: _____
Supervisor Name: _____
Address: _____
City/State/Zip: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

CERTIFICATION

I certify that the information provided on the application is truthful and accurate. I understand that providing false or misleading information will be the basis for the rejection of my application, or if employment commences immediate termination.

I authorize Right The 1st Time to contact former employers regarding my employment. I authorize my former employers to communicate information fully and freely regarding my previous employment and attendance.

Applicant Printed Name: _____

Applicant Signature: _____

Date: _____