



Employment Application

712 Fannie Ave. St. Louis, MO 63125 phone: 314-802-7301 fax: 314-802-7315

Spotless offers equal employment opportunities to all persons. All employment decisions are based on each individual's qualifications, without regard to race, color, religion, age, sex, disability, national origin or Vietnam Era Veteran status.

Applicant Personal Information

Date: _____

Last Name		First Name		Middle
Address		City	State	Zip Code
Cell Phone	Home Phone	Email Address	Social Security Number	

Are you at least 18 years old? yes no

Are you legally qualified to work in the U.S.? yes no

Have you been convicted of a felony or misdemeanor? yes no

If yes, please explain (including dates):

Are you currently employed? yes no If yes, please state employer: _____

Have you been employed by Spotless previously? yes no If yes, list dates of employment: _____

How were you referred to Spotless? Internet Current Employee Other _____

If current employee, please list name:

Position Information

Position Applied For:	Salary Expectations:
Date Available to Start:	Hours Available to work:
Employment Status Desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	Days Available to Work: <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F <input type="checkbox"/> Sat <input type="checkbox"/> Sun
Are you capable of performing, with or without a reasonable accommodation, the activities involved in the job for which you have applied? <input type="checkbox"/> yes <input type="checkbox"/> no	

Education

	Institution Name & Location (City & State)	Years Attended	Did you graduate?	Degree Achieved
High School				
College				
Grad School				
Other				

Employment History

Name of Employer		Phone	Last Position Held		
Address		City	State	Zip	
Name of Supervisor	Start Date (mo/yr)	End Date (mo/yr)	Hrs/Wk	Ending Salary	
Reason for Leaving			May we contact this employer? <input type="checkbox"/> yes <input type="checkbox"/> no		

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Address		City	State	Zip	
Name of Supervisor	Start Date (mo/yr)	End Date (mo/yr)	Hrs/Wk	Ending Salary	
Reason for Leaving			May we contact this employer? <input type="checkbox"/> yes <input type="checkbox"/> no		

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Reason for Leaving			May we contact this employer? <input type="checkbox"/> yes <input type="checkbox"/> no		

Licenses/Skills/Training: *Please list any job-related skills, licenses, and training acquired through education and/or employment.*

References: *Please list three professional references below.*

Name	Title/Relationship	Phone Number

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that I may be required to have additional criminal background checks completed as well as be required to take a physical examination as a condition of employment. I agree to consent to take such test(s) at such time as designated by Spotless and to release Spotless, its directors, officers, agents or employees from any claim arising in connection with the use of such test(s).

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Signature: _____ **Date:** _____