

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer

O'Snap Cleaning Services is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, veteran status, or any other status protected by law.

POSITION	
Position: _____	Date of Application: _____
How did you learn about us?	
<input type="checkbox"/> Advertisement	
<input type="checkbox"/> Friend	
<input type="checkbox"/> Walk-in	
<input type="checkbox"/> Employment Agency	
<input type="checkbox"/> Other: _____	

PERSONAL INFORMATION		
Last Name, First, & Middle: _____		
Street Address: _____		
City: _____	State: _____	Zip Code: _____
Phone Number: _____	Alt: _____	
Email: _____		
Are you a US citizen or legally eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have access to reliable transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you ok with pre-employment drug testing? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Available to start: _____		
Type of Employment Desired:		
<input type="checkbox"/> Full-time		
<input type="checkbox"/> Part-time		
<input type="checkbox"/> Temporary		

EDUCATION

High School:

School Name: _____

School Address: _____

Years completed: _____

Diploma: Yes No

College/University (if applicable):

School Name: _____

School Address: _____

Years completed: _____

Degree: Yes No

EMPLOYMENT HISTORY

Employer 1 (most recent)

Company Name: _____

Address: _____

Title: _____ Dates Employed: From _____ To: _____

Reason For Leaving:

Employer 2

Company Name: _____

Address: _____

Title: _____ Dates Employed: From _____ To: _____

Reason For Leaving:

REFERENCES (At Least One Professional)

Name: _____
 Relationship: _____
 Phone Number: _____
 Email Address: _____

Name: _____
 Relationship: _____
 Phone Number: _____
 Email Address: _____

Name: _____
 Relationship: _____
 Phone Number: _____
 Email Address: _____

Drug and Alcohol Testing Consent

I understand that O'Snap Cleaning Services maintains a drug- and alcohol-free workplace. I consent to pre-employment drug testing as a condition of employment, as well as random or reasonable-suspicion testing, where permitted by law. Refusal to submit to testing or a positive result may disqualify me from employment or result in termination.

At-Will Employment

I understand that submission of this application does not guarantee employment. If hired, my employment with O'Snap Cleaning Services is at-will, meaning that either I or O'Snap Cleaning Services may terminate employment at any time, with or without cause or notice, except as otherwise required by law.

Certification of Information

I certify that all information I have provided in this application is true, complete, and accurate. I understand that any false statements, misrepresentations, or omissions of fact may disqualify me from further consideration for employment and, if discovered after employment begins, may result in termination.

Signature: _____ Date: _____

Background Check Notice

O'Snap Cleaning Services may request a background check in connection with your application. If we use a third-party service to obtain a consumer report or investigative consumer report, it will comply with the Fair Credit Reporting Act (FCRA). You will be notified separately and given the required disclosures and authorization forms before any report is obtained.

BACKGROUND CHECK AUTHORIZATION

I hereby authorize O'snap Cleaning Services, LLC to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that O'snap Cleaning Services, LLC will utilize an outside source or firm to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice.

I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment may not be processed further.

PERSONAL INFORMATION (needed for background check)

Full Name(First, Middle, Last): _____

Date of Birth (MM/DD/YYYY): _____

Social Security Number: _____

Drivers License Number: _____ EXP Date: _____ State: _____

AUTHORIZATION

I understand the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas:

- Verification of Social Security Number
- Current and Previous Residents
- Employment history, education background, character references
- Criminal history, including background checks at county courthouses
- Motor Vehicle records

I, _____ (print), do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, to any duly authorized agent of O'snap Cleaning Services, LLC, whether said records are public, private, or confidential in nature.

Signature: _____ Date: _____