



2060 Vista Ave SE
Salem, OR 97302
Phone: 503-585-2821

OFFICE USE ONLY



Date: _____

PERSONAL INFORMATION

_____ Last _____ First _____ Middle

Have you used any other name(s)? If so, please list: _____

Current Address: _____

City: _____ State: _____ Zip code: _____

Past Address: _____

City: _____ State: _____ Zip code: _____

Phone number: (Home) _____ (Cellular) _____ (Work) _____

Driver's License #: _____ State ID#: _____ State Issued: _____

Social Security Number: _____



NOTE: READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY OF THE FOLLOWING QUESTIONS The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal Law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to credit data.

Are you over the legal age of 18 years? Yes No

Are you a citizen of the United States of America? Yes No

If No, are you authorized to work in the US Yes No

Upon employment, are you willing to take a drug test? Yes No

Position desired: _____ What date are you available to start? _____

How did you hear about ServiceMaster? _____

Have you ever applied for employment with us? Yes No If Yes, when? _____

Have you been previously employed by us? Yes No If Yes, when? _____

How many hours per week do you want to work? (Minimum) _____ (Maximum) _____

Please check the days you are willing to work: Sun Mon Tues Wed Thur Fri Sat

Do you prefer: Evening/Swing Shift hours Daytime hours Night/Graveyard hours ALL

What time of day are you available to begin? _____

EXPERIENCE:

Although janitorial experience is not mandatory for this position and superior hands-on training is provided to all employees, some knowledge of the field may be helpful to the employee.

I have experience with or knowledge of the following:

Basic Housekeeping Skills

Floor Stripping, Waxing, or Buffing

Restroom Sanitizing

Wet Vac Operation

Wall Washing

Carpet Cleaning

Commercial Window Cleaning

Upholstery Cleaning

Vacuum Cleaner Repair

Crew Supervision

___ Lifting Capacity in pounds (lbs)

Are there any other experiences, skills, abilities, or qualifications that will benefit in the job for which you are applying? _____

RECORD OF EDUCATION:

Type	School name & address	Circle last year completed	Did you Graduate?	List diploma or degree
High School		1 2 3 4		
College or Vocational		1 2 3 4		

Please continue to the following page

EMPLOYMENT HISTORY

Please list below your present and past job history,
IN CONSECUTIVE ORDER BEGINNING WITH YOUR MOST RECENT EMPLOYMENT.

1. Name, address & phone number of company:	From		To		Starting Hourly Wage	Ending Hourly Wage
	Month	Year	Month	Year		
	Reason for Leaving:				Supervisor's Name:	
Describe the work you did:						
Phone: May we contact them: <input type="checkbox"/> Yes <input type="checkbox"/> No						
2. Name, address & phone number of company:	From		To		Starting Hourly Wage	Ending Hourly Wage
	Month	Year	Month	Year		
	Reason for Leaving:				Supervisor's Name:	
Describe the work you did:						
Phone: May we contact them: <input type="checkbox"/> Yes <input type="checkbox"/> No						
3. Name, address & phone number of company:	From		To		Starting Hourly Wage	Ending Hourly Wage
	Month	Year	Month	Year		
	Reason for Leaving:				Supervisor's Name:	
Describe the work you did:						
Phone: May we contact them: <input type="checkbox"/> Yes <input type="checkbox"/> No						
4. Name, address & phone number of company:	From		To		Starting Hourly Wage	Ending Hourly Wage
	Month	Year	Month	Year		
	Reason for Leaving:				Supervisor's Name:	
Describe the work you did:						
Phone: May we contact them: <input type="checkbox"/> Yes <input type="checkbox"/> No						

I hereby give my permission to contact the employers listed above concerning my prior work experience.

I certify that all of the statements made by me on this application for employment are true, correct and complete to the best of my knowledge. I understand that any false statements or willful omission of fact(s) made in this application may be sufficient grounds for rejection of this application or an offer of employment, or if discovered after employment may result in immediate dismissal at any time.

I understand that applications which are not complete may not be processed.

Signed: _____ Date: _____