



Application for Seasonal Employment

Please check position(s) you are Seeking

Saturday Changeovers Sunday Changeovers Sat. & Sun. Changeovers Cape Line Rentals

First : _____ Last: _____ Middle: _____

Address _____ City _____ State _____ Zip _____

If < 3 Years please list previous address

Address _____ City _____ State _____ Zip _____

Home # _____ Cell # _____ SS# _____

Date of Birth: _____ Drivers License # _____ State: _____

If you are under 18 years of age can you provide proof of your ability to work? ____ Yes ____ No

If not a US citizen can you provide proof of your eligibility to work in the US? ____ Yes ____ No

Are you currently employed? ____ Yes ____ No | May we contact current employer? ____ Yes ____ No

When are you available to work? ____ Saturday ____ Sunday ____ Both ____ Anytime

Would you be willing to drive to the job sites? ____ Yes ____ No ____ Possibly

Do you speak another language? ____ Yes I speak _____ ____ No

In the past 10 years have you had a substance abuse problem? ____ Yes ____ No If Yes please explain

Have you ever had a DUI? If Yes how long ago? Please explain:

Have you ever been convicted of a felony? ____ Yes ____ No If Yes please explain

Have you ever been convicted of a crime of violence? ____ Yes ____ No If Yes please explain

WORK EXPERIENCE
Please list previous employment.

Have you ever been terminated by an employer? ____ Yes ____ No If Yes please explain

1. Employer Dates Employed: From _____ To _____

Address: _____ Telephone # _____

Position & Duties: _____

Reason for Leaving: _____

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2. Employer Dates Employed: From _____ To _____

Address: _____ Telephone # _____

Position & Duties: _____

Reason for Leaving: _____

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REFERENCES

Please list 3 Names, Addresses & Telephone Numbers of references who are NOT related to you

1. Name _____ Phone: _____

2. Name _____ Phone: _____

3. Name _____ Phone: _____

I _____ hereby certify that all of the information provided by me is correct, accurate and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby understand that if a position is offered with Sparkle Edge Cleaners or Cape Linen Rentals any employment relationship is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge employee at any time with or without cause.

I understand that if offered a position with Sparkle Edge Cleaners or Cape Linen Rentals, I may be required to submit to a background check, credit history, criminal record and verification of driving record. I understand that unsatisfactory results from, refusal to cooperate with, or an attempt to affect results of these pre-employment checks will result in withdrawal of employment offer and or termination of employment.. I also consent to periodic drug screening as a condition of employment..

I understand I am required to abide by all rules and regulations of Sparkle Edge Cleaning & Cape Linen Rentals.

Signature of Applicant _____ Date _____



30 Day Work Trial Employment Agreement

I, _____ understand that the first 30 days of my employment will be a training / probation period. After the 30 day period the management of Sparkle Edge Cleaning or Cape Linen Rentals will evaluate my work. If management determines, for any reason, I am not performing my job responsibilities adequately, I understand they have the right to terminate my employment.

Employee Signature

_____/_____/_____
Date