

PRISTINE

Commercial Cleaning Service, Inc

Part-Time Employment Application

APPLICANT INFORMATION (PLEASE PRINT)			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.		
Emergency Contact			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you 18 years of age or older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, Date of Birth
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three references.</i>	
Full Name	Relationship
Years Known	Phone ()
Address	
Full Name	Relationship
Years Known	Phone ()
Address	
Full Name	Relationship
Years Known	Phone ()
Address	

PREVIOUS EMPLOYMENT (MOST RECENT)

Company	Phone ()
Address	Supervisor
Job Title	
Reason for leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> Dates Employed	
Company	Phone ()
Address	Supervisor
Job Title	
Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> Dates Employed	
Company	Phone ()
Address	Supervisor
Job Title	
Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> Dates Employed	

AVAILABILITY

Please list the times you are available to work each day.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time							
Stop Time							

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature _____ Date _____

**NOTICE, AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF
BACKGROUND REPORT**

I, the undersigned, do hereby authorize **Pristine Commercial Cleaning Service, Inc**, by and through its independent contractor, **KROLL**

BACKGROUND AMERICA, INC. ("KBA"), to procure various investigative reports on me. I understand that this authorization and release shall be valid for subsequent investigative reports during my period of employment with **Pristine CCS**.

These above-mentioned reports may include, but are not limited to, information as to my character, general reputation, and personal characteristics, discerned through employment and education verifications; personal references; personal interviews; my driving history, including any traffic citations; a social security number verification; present and former addresses; and criminal history records.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to **Pristine CCS**, by and through **KBA**, including, but not limited to any and all courts, public agencies, and law enforcement agencies, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative report of which I am the subject upon my written request to **KBA**, if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C. § 1681et.seq.

Signature: _____ Date: _____

IDENTIFYING INFORMATION FOR BACKGROUND REPORTING AGENCY

PLEASE PRINT

NAME:

FIRST _____

MIDDLE _____

LAST _____

OTHER NAMES (MAIDEN, NICK NAME ETC) _____

CURRENT ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

FORMER ADDRESS _____

CITY _____ **STATE** _____ **ZIP CODE** _____

SOCIAL SECURITY NUMBER _____

DRIVER'S LICENSE NUMBER _____ **STATE** _____ **EXPIRATION** _____

DATE OF BIRTH _____ **GENDER** _____