



Freshen Up

PO Box 9130 | Hampton, VA 23670
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freshenupinc@gmail.com

APPLICATION FOR EMPLOYMENT

Please Print

Personal Information

Date _____ Social Security No. _____ - _____ - _____ Date of Birth _____

Name _____
First Middle Last

Address _____
Number Street City State Zip

Home Telephone _____ Cell Phone _____

Position applied for _____ Desired salary _____

Days/hours available to work:

Mon _____ Tue _____ Wed _____ Thur _____ Fri _____ Sat _____ Sun _____

Employment desired Full-Time Only Part-Time Only Full Or Part-Time

Date available to start work? _____

Do you have a driver's license? Yes No If yes, what type? Operator Commercial (CDL) Chauffeur

Driver's license number _____ State of issue _____ Expiration date _____

Have you ever been convicted of driving under the influence of drugs or alcohol? Yes No

Have you had any accidents or moving violations during the past three years? Yes No If yes, how many? _____

Have you ever been convicted of a crime? Yes No If yes, please explain each conviction, nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Would you anticipate any problem passing a drug screening test? Yes No

Can you see colors? Yes No

Have you ever been in the military? Yes No If yes, date enlisted _____ Date discharged _____

Which branch? _____ Highest rank? _____ Specialty? _____

Are you now a member of the national guard? Yes No

Who should we contact in case of an emergency?

1. Name _____ Relationship _____ Phone #1 _____ Phone #2 _____

2. Name _____ Relationship _____ Phone #1 _____ Phone #2 _____

Please list two work-related references, not friends or relatives.

Name _____
 City, State _____
 Relationship _____
 Telephone _____
 E-mail _____

Name _____
 City, State _____
 Relationship _____
 Telephone _____
 E-Mail _____

Education, Training, Skills

	Name	City, State	Years Completed	Major / Degree	Grad Year
High School					
College					
Trade					
Professional					
Other					

Have you had any formal training in carpet cleaning? Yes No If yes, please describe the nature of the training, when it was received and who provided it. _____

Have you had any other training or do you have any other skills that you believe could be helpful to Freshen Up? _____

Work Experience

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give business name. **Attach additional sheets if necessary.**

Most recent employer:

Name of employer _____ Last position _____
 Address _____ City, State, Zip _____
 Last supervisor _____ Telephone _____
 Start date _____ End date _____
 Start pay _____ End pay _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason for leaving (please be specific) _____

Next most recent employer:

Name of employer _____

Last position _____

Address _____

City, State, Zip _____

Last supervisor _____

Telephone _____

Start date _____

End date _____

Start pay _____

End pay _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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