



## Application for Employment

Name (Printed):	Date:
Position Applying For:	How Did You Hear About Us?

Enterprise Professional Services, Inc. is an equal employment opportunity employer. Applications will be considered for employment without regard to race, color, creed, national origin, religion, age, sex, disability or veteran status. This application will not be considered unless all questions are fully and accurately answered. This application will not be considered unless signed by the applicant. The use of this form does not indicate that there are any positions presently open and does not, in any way, obligate this Company. This application for employment is not a contract of employment and in no way constitutes a commitment by the Company to hire any applicant for employment.

### Important! Read Thoroughly Before Completing

I authorize the Company to fully investigate all information furnished in this application, and also authorize and release each former employer given in this application as an employer to give any information that may be sought in connection with this application, or concerning my work habits or character.

I declare all statements contained in this application to be true and correct. I certify that the answers given herein are true 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. Furthermore, I understand and agree that should I be hired, my employment is for no definite period and may, regardless of the date of payment of my wages or salary, be terminated at any time without any previous notice and without any requirement of cause. I understand that false or misleading information or omissions given in my application, exhibits, resumes or interview(s) will result in rejection of this application or discharge whenever discovered. I understand that I stipulate that I will not challenge my discharge if I provide any misleading information or omissions on my application. I understand also that, if hired, I am required to abide by all the rules and regulations of the company. I further understand and agree that no employee or official of the company has any authority to alter the terms of my at-will employment through oral statements or promises. In order to be binding on the company, any agreement or promise that alters this policy must be in writing and signed by the president of the company.

Signature: \_\_\_\_\_  
(Applicant Must Sign)

After you have read this entire page and if you understand it and would like to apply for a job with ENTERPRISE PROFESSIONAL SERVICES, INC. please fill out all pages of this application.

**PERSONAL**

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Present Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Previous Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Telephone: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
(Include area code)

Are you over 16 years old?  (Yes)  (No)

**AVAILABILITY**

Applying For:  (Full Time)  (Part Time)

On what date would you be available for work? \_\_\_\_\_

**CITIZENSHIP**

Do you have a legal right to accept work in the United States?  Yes  No

**DRIVING RECORD**

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Number of Moving Violations During the Past 3 Years: \_\_\_\_\_

Number of Accidents During the Past 3 Years: \_\_\_\_\_

*Notice: Driving Record Verification is Required*

**OFFENSES**

Have you ever been convicted of, pled guilty to, received probation, deferred adjudication, or been placed on any form of diversion for any criminal offense (misdemeanors and felonies)?

\*  Yes  No

\*If yes, describe in full, including criminal offense(s), current status, expected date of completion and the name(s) and the number(s) of the probation officer or other person(s) to whom you report while on probation, deferred adjudication or other diversion.

*Notice: Your criminal records will be checked*

Will you sign a release form for an Authorization for Criminal Record Investigation? \*  Yes  No

*Notice: Conviction is not necessarily a bar to employment*

## EDUCATION

(Circle the Highest Grade Completed)

Grade School: 1  2  3  4  5  6  7  8

High School: 9  10  11  12

College: 1  2  3  4

Degree: \_\_\_\_\_

Location: \_\_\_\_\_

Other School (i.e., Technical Schools)

School: \_\_\_\_\_

Field of Study: \_\_\_\_\_

School: \_\_\_\_\_

Field of Study: \_\_\_\_\_

School: \_\_\_\_\_

Field of Study: \_\_\_\_\_

School: \_\_\_\_\_

Field of Study: \_\_\_\_\_

License (s) Maintained for your trade: \_\_\_\_\_

## EXPERIENCE

(Indicate below specific and /or special experience you possess)

Housekeeping (Custodial) Years Experience: \_\_\_\_\_ Specializing In: \_\_\_\_\_

Food Service Years Experience: \_\_\_\_\_ Specializing In: \_\_\_\_\_

Facilities Maintenance Years Experience: \_\_\_\_\_ Specializing In: \_\_\_\_\_

Warehousing and Logistics Years Experience: \_\_\_\_\_ Specializing In: \_\_\_\_\_

Grounds and Landscaping Years Experience: \_\_\_\_\_ Specializing In: \_\_\_\_\_

Other: Years Experience: \_\_\_\_\_ Specializing In: \_\_\_\_\_

## CURRENT EXPERIENCE

Present Employer:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address) (City) (State) (Zip)

\_\_\_\_\_  
Telephone (Include Area Code)

Position: \_\_\_\_\_ Salary: \_\_\_\_\_ Hourly Rate: \_\_\_\_\_

Work Dates: (From) \_\_\_\_\_ (To) \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**PREVIOUS EXPERIENCE**

**List most recent first)**

1. Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No.:( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
Type of Business \_\_\_\_\_ Duties: \_\_\_\_\_  
\_\_\_\_\_  
Work Dates (From) \_\_\_\_\_ To: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Beginning Salary/Hourly Wage (\$): \_\_\_\_\_ Ending Salary/Hourly Wage: \_\_\_\_\_

2. Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No.:( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
Type of Business \_\_\_\_\_ Duties: \_\_\_\_\_  
\_\_\_\_\_  
Work Dates (From) \_\_\_\_\_ To: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Beginning Salary/Hourly Wage (\$): \_\_\_\_\_ Ending Salary/Hourly Wage: \_\_\_\_\_

3. Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone No.:( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
Type of Business \_\_\_\_\_ Duties: \_\_\_\_\_  
\_\_\_\_\_  
Work Dates (From) \_\_\_\_\_ To: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_  
Beginning Salary/Hourly Wage (\$): \_\_\_\_\_ Ending Salary/Hourly Wage: \_\_\_\_\_