



## ABC Home & Commercial Services Applicant Instructions

Thank you for your interest in working at our company. Our people make us successful and the employment process is an important aspect of building our team. We appreciate your application and are glad you have shown an interest in joining our team. This sheet is for your information.

Please complete the attached application and authorization for release of information forms. Please print all information so it may be easily read. Be certain that each section is completely filled out and that you sign and date where applicable. Use the abbreviation "N/A" if a particular provision or section in the form is not applicable to you. Incomplete applications will not be considered.

We will keep your application on file for 6 months. Should an appropriate opening occur, your application will be reviewed along with others. If you are among the most qualified applicants for the position, an interview will be arranged. It is not necessary for you to contact this office regarding any job openings after you have completed your application. Please notify us in writing if your address or telephone number should change.

Employment decisions are made solely on the basis of qualifications to perform the work for which you are applying. Qualifications include education, training, work experience and other factors which are relevant in determining job performance. Credentials and experience will be verified through schools, former employers, and licensing/certification agencies. As an Equal Opportunity Employer, decisions to hire and promote are made without regard to race, color creed, national origin, gender, pregnancy, physical or mental disability or age (as defined by law).

ABC Home & Commercial Services conducts criminal, MVR and background investigations on all applicants and verifies eligibility of employment through E-Verify. All employees must pass a drug screen.

We appreciate your cooperation.

How did you learn of this position?

Date of Application \_\_\_\_\_

- Employment Guide                       Signage on Building  
 Austin American Statesman             Other

## APPLICATION FOR EMPLOYMENT

Please print or type.

**“SEE RESUME” is not a sufficient response to any question.**

### Personal Information

Last Name	First	Middle	Social Security Number																
Street Address			Home Telephone																
City, State, Zip Code			Alternate Phone No																
Position Desired	Date Available to Start Work	Salary/Wage Desired	Have you been employed with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes give date _____)																
Type of Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary  Shift: Day <input type="checkbox"/> Evening <input type="checkbox"/> Night <input type="checkbox"/>  Days you are available to work: S M T W T F S (circle) Do you have transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you legally eligible for employment in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No  Are you age 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No  (If no, hire is subject to verification that you are of legal minimum age to work).  <b>If hired, can you provide proof of eligibility to work in the U.S?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever been convicted or received a sentence for any cause whatsoever, with the exception of a Class C Misdemeanor Traffic Violation? <input type="checkbox"/> Yes <input type="checkbox"/> No  Fill in the details concerning each arrest. If additional space is needed use the back of this page.  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Date</th> <th style="text-align: left;">Charge</th> <th style="text-align: left;">City &amp; State</th> <th style="text-align: left;">Disposition of Case</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> <p><b>NOTE: A conviction is not necessarily an automatic bar to employment, but a false statement is.</b></p>		Date	Charge	City & State	Disposition of Case	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Date	Charge	City & State	Disposition of Case																
_____	_____	_____	_____																
_____	_____	_____	_____																
_____	_____	_____	_____																

### EDUCATION/SKILLS

Level	Name and Location of School	Diploma or Degree (Credits Earned if No Degree)	Attendance Dates		Major (If applicable)
			From Mo/Yr	To Mo/Yr	
Grammar School					
High School					
Business, Trade or Technical*					
College*					
Other*					

\*Specific skills and qualifications acquired from employment or other experiences that are related to the position for which you are applying (e.g., computer skills, software applications, and foreign languages):

## MILITARY SERVICE

If Military, what branch? \_\_\_\_\_ Rank at discharge? \_\_\_\_\_

Current Membership in National Guard or Reserves  Yes  No      Were you honorably discharged  Yes  No

## EMPLOYMENT HISTORY

Please provide a COMPLETE employment history for the last 15 years, **even if a resume is submitted with this application.** List ALL employers, assignments, or volunteer activities that are relevant to the job for which you are applying, starting with the most recent, including military employment. Explain any gaps in employment in the "Comments" section below. Please use an additional sheet if space is needed.

<b>(1) Present/Most Recent Employer</b> Telephone _____	Dates Employed			Summarize the nature of the work performed and job responsibilities.
	From Mo/Yr	To Mo/Yr		
Address				
Job Title	Hourly Rate/Salary			
	Starting			
Immediate Supervisor and Title	\$	per		
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other	Hourly Rate/Salary			
	Final			
Reason for leaving or why you are considering leaving?	\$	per		
If currently employed, may we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>(2) Next Previous Employer</b> Telephone _____	Dates Employed			Summarize the nature of the work performed and job responsibilities.
	From Mo/Yr	To Mo/Yr		
Address				
Job Title	Hourly Rate/Salary			
	Starting			
Immediate Supervisor and Title	\$	per		
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other	Hourly Rate			
	Final			
Reason for leaving?	\$	per		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				

**EMPLOYMENT HISTORY CONT.**

<b>(3) Next Previous Employer</b>	<b>Telephone</b>	<b>Dates Employed</b>		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment		Hourly Rate		
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Final		
<input type="checkbox"/> Temporary <input type="checkbox"/> Other				
Reason for leaving?		\$	per	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				

<b>(4) Next Previous Employer</b>	<b>Telephone</b>	<b>Dates Employed</b>		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment		Hourly Rate		
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Final		
<input type="checkbox"/> Temporary <input type="checkbox"/> Other				
Reason for leaving?		\$	per	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				

COMMENTS (Please explain all periods of unemployment. If additional space is needed please use an additional sheet):

*Specialists for your environment*

**REFERENCES**

List three business/work references that are **NOT** related to you and are **NOT** previous supervisors. If not applicable, list three school or personal references that are not related to you.

Name	Telephone	Years Known	In what capacity did this person observe you or your work?

**RELATED EMPLOYMENT INFORMATION**

Have you ever been terminated?  Yes  No

If yes, please explain:

**OPERATION OF MOTOR VEHICLE, OWNED OR LEASED BY THE COMPANY**

The following section must be completed if you are applying for a position which requires the operation of a motor vehicle, owned or leased by the company, or if you must use your own vehicle for company purposes.

DRIVER'S LICENSE NO \_\_\_\_\_ STATE ISSUED \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

Is this license currently valid?  Yes  No

Do you have auto liability insurance?  Yes  No

If yes, please give name of insurance company and expiration date \_\_\_\_\_

**OTHER MOTOR VEHICLE INFORMATION**

Have you been involved in a motor vehicle accident or had any moving violations within the last five (5) years?  Yes  No

If yes, fill in the details concerning each accident. If additional space is needed use an additional sheet of paper.

Date, Location and Details:

Date, Location and Details:

Date, Location and Details:

Date, Location, Type and Disposition

Date, Location, Type and Disposition

If you have been convicted of driving while intoxicated or under the influence of drugs or alcohol, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: If you are hired for a position which requires driving, you must keep us informed of any changes in your driving record.**

Employers in Texas have a legal duty in regard to each employee's safety. You, your fellow worker's and our customers' safety is of utmost importance to ABC Home & Commercial Services. It is neither beneficial to you nor us to place you in a job where you have higher risk of injury because of a mental or physical condition. As an Equal Opportunity Employer, we consider applicants for employment regardless of their disabilities; however, in addition to our own requirement, the Americans with Disabilities Act also require us to make certain that each employee is capable of performing the essential functions of the job. Therefore, you must be honest with us in regard to your personal evaluation as to your abilities to perform the essential functions as described in the job description. If you are unable to perform the essential functions of the job we welcome you to discuss any needs for accommodations that would allow you to perform the job in accordance with the job description.

Are you physically and/or mentally capable of performing the essential functions of the job?  Yes  No

If no, state the accommodations that would allow you to perform the job.

I certify that all the information given on this application is true, correct, and complete to the best of my knowledge. I also certify that I have accounted for fifteen (15) years of work experiences and any relevant training on this application, and that I have not knowingly withheld any fact or circumstance, which would, if disclosed, affect my application unfavorably.

ABC Home Commercial Services is hereby authorized to make any investigation of my past employment (current employment, if indicated above that this would not pose any difficulty), education, driving, or criminal history through any investigative agencies or bureaus of its choice. I release all relevant parties from all liability of any damages resulting from furnishing such information.

I understand that an offer of employment and continued employment with the company is contingent upon my furnishing satisfactory proof of my authorization to work in the United States.

If employed by ABC Home & Commercial Services, I agree to abide by its rules and regulations. I understand that discovery of misrepresentation or omission of facts herein will make me ineligible for employment or will be cause for immediate dismissal. I agree to furnish additional information as may be required to complete my employee file. I understand that operating conditions may require me to temporarily work shifts other than the one I am applying for and I agree to such scheduling changes as directed by my supervisor.

I also understand that my employment may be subject to completion of the Physical Examination and Mobility Evaluation, which includes a drug and alcohol screening and I understand that my continued employment may be conditioned upon maintaining a favorable health evaluation and drug/alcohol screening. I also agree that all information concerning said physical examination can be release to the authorized agent of this company, upon request.

I understand that this is an application for employment and that no employment contract, either expressed or implied, is being offered. I also understand that if employed, such employment is for an indefinite period and can be terminated at will by either party, with or without notice, at any time for any or no reason, and is subject to change in wages, conditions, benefits, and operating policies.

**I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS:**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Notify In Case of Emergency:**

Name \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please write a statement listing your attributes that will make you a good specialist employee for ABC Home & Commercial Services (Please sell yourself):**

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**RELEASE OF EMPLOYMENT RECORDS**

\_\_\_\_\_ hereby authorize \_\_\_\_\_ of ABC Home & Commercial Services to investigate all facts contained in my application for employment with said company, and authorize the release of any and all information by my present (if indicated on application that this would not pose any difficulty) and past employers, wherever located, which may be required for a reference check. I further authorize all of my previous employers and current employer to give any and all information concerning my employment and any other pertinent information which said employers may have, personal or otherwise, and I release all parties from all liabilities for any damages which may result from the furnishing of said information.

A copy of this release shall be as valid as the original.

Dated \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Printed Name of Witness



**CRIMINAL BACKGROUND AUTHORIZATION**

I am willing that a photocopy of this authorization be accepted with the same authority as the original.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Printed Name (Last,First,Middle)

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
City State Zip

NOTE: The following information is proved voluntarily and IS NOT considered as part of your application for employment. It is used for identification purposes in verifying information for employment background verifications.

List any other cities and states in which you have lived during the past seven (7) years: \_\_\_\_\_

List any other names you have used during the previous seven (7) years: \_\_\_\_\_

List any other name under which you received your GED, high school diploma, or other degree: \_\_\_\_\_

Please provide name, location, and date of the schools) attended:

_____ High School	_____ Location	_____ Date of Graduation
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_____ Further Education	_____ Location	_____ Date of Graduation
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_____ Driver's License Number	_____ State of License	_____ Date of Birth
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\*\*\*\*\*MAY CURRENT EMPLOYER BE CONTACTED?  Yes  No