



**Position Applying For:** \_\_\_\_\_

**Your Personal Information**

**Today's Date:** \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

SSN# \_\_\_\_\_ DOB \_\_\_\_\_

Preferred method of contact:  Home Phone  Cell Phone  Email  Other: \_\_\_\_\_

**Your Work History and Any Employment Gaps**

List most recent or current job first. You must include any gaps in employment, with a full explanation and dates for the gaps.

Employer _____
Address _____ City/State _____ Zip Code _____
Job Title _____ Phone _____
Dates Employed – From (Mo/Yr) _____ To (Mo/Yr) _____
Hourly Rate, Weekly Salary, or Other Weekly Earnings – Starting _____ Final _____
Summary of Work Performed & Job Responsibilities _____
Supervisor's Name _____ <input type="checkbox"/> Resigned or <input type="checkbox"/> Terminated

Employer _____
Address _____ City/State _____ Zip Code _____
Job Title _____ Phone _____
Dates Employed – From (Mo/Yr) _____ To (Mo/Yr) _____
Hourly Rate, Weekly Salary, or Other Weekly Earnings – Starting _____ Final _____
Summary of Work Performed & Job Responsibilities _____
Supervisor's Name _____ <input type="checkbox"/> Resigned or <input type="checkbox"/> Terminated

# APS Employment Application

Employer _____
Address _____ City/State _____ Zip Code _____
Job Title _____ Phone _____
Dates Employed – From (Mo/Yr) _____ To (Mo/Yr) _____
Hourly Rate, Weekly Salary, or Other Weekly Earnings – Starting _____ Final _____
Summary of Work Performed & Job Responsibilities _____
Supervisor's Name _____ [ <input type="checkbox"/> ] Resigned or [ <input type="checkbox"/> ] Terminated

## Tell Us About Yourself

You must answer EVERY question on this application. If a question does not apply, put "N/A".

What position are you applying for? \_\_\_\_\_

What is your salary expectation? \$ \_\_\_\_\_

When can you start work? (Date) \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

Have you completed an application here before? [  ] Yes [  ] No

Have you been employed here before? [  ] Yes [  ] No

Available work schedule [  ] Full-time [  ] Part-time [  ] Temporary

Are there any days or times during the week that you are not available to work? [  ] Yes [  ] No

If yes, please list the days/times you are not available to work \_\_\_\_\_

Can you provide proof that you are over any minimum work age requirement? [  ] Yes [  ] No

Are you willing to work overtime? [  ] Yes [  ] No

Do you have steady transportation to work? [  ] Yes [  ] No

Can you travel, if required? [  ] Yes [  ] No

Are you on a layoff and subject to recall? [  ] Yes [  ] No

May we contact your present employer? [  ] Yes [  ] No

## APS Employment Application

How much time have you lost from work during the past 12 months? \_\_\_\_\_

Have you ever been terminated or asked to resign from a job? [  ] Yes [  ] No

If yes, please explain \_\_\_\_\_

Are you legally eligible to work in the United States? [  ] Yes [  ] No

What three things are most important to you in a job?

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

What three adjectives best describe you?

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

Why do you want to work here? \_\_\_\_\_

### **Tell Us About Your Special Skills and Qualifications**

List any special skills, training, experience, certifications, or licenses that may be relevant to this position or our company \_\_\_\_\_

\_\_\_\_\_

List any professional, trade, business, or civic activities or offices held that would relate to working here

\_\_\_\_\_

List any foreign languages that you fluently speak, read, and/or write that would relate to working here

\_\_\_\_\_

List software programs that you are proficient in \_\_\_\_\_

### **Your Educational Background**

## APS Employment Application

Schooling	Did you graduate?	Years Completed	Degree Received & Major Subject	Name of School	Location
High School	[ ] yes [ ] no				
Trade, Business, or correspondence	[ ] yes [ ] no				
College	[ ] yes [ ] no				
Graduate School	[ ] yes [ ] no				

### Tell Us About Your Driving Record

Necessary for positions that may require use of a personal or company vehicle for work.

Do you hold a valid Driver's License? [ ] Yes [ ] No If yes, provide the state \_\_\_\_\_

Have you been convicted of any moving violation(s) in the last 3 years? [ ] Yes [ ] No

If yes, give date(s) and explanation of each \_\_\_\_\_

### Tell Us About Your Past

Have you ever been disciplined or terminated from any job for an act of violence, harassment, discrimination, ethical breach, or theft?

[ ] Yes [ ] No If yes, explain the circumstances, employer, and date \_\_\_\_\_

### Tell Us About Any Records

Have you ever been convicted of; received a sentence for; pled nolo contendere (no contest) to; been placed on probation, fined, or entered a pretrial intervention program for; or had adjudication withheld by any judicial or quasi-judicial body for a crime, other than a minor traffic violation? *(Any criminal record not disclosed by you may be considered falsification of this application, which may result in revocation of your employment offer or termination of your employment. Also, in accordance with any state or federal regulations, you may be required to provide copies of any criminal records. Answering "yes" to this question is not an automatic bar to employment.)*

[ ] Yes [ ] No

If yes, describe the details of the conviction or other disposition of the charge, the date of the offense (month, and year), your age at the time of the offense, and your rehabilitation since the conviction and/or disposition of the offense \_\_\_\_\_

## Non-Compete Agreement

Are you currently subject to a Non-Compete Agreement or Restrictive Covenant that would prohibit you from working at our company in the position for which you are applying? [ ] Yes [ ] No

If yes, provide a copy of the agreement and state the name of the company: \_\_\_\_\_

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## Background Check Consent

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK?

YES  NO

## Disclaimer Agreement and Release

Alexandria Pest Services Inc (APS), APS is hereby authorized to make any investigation of my personal history, criminal, and motor vehicle records. I understand that a criminal record or sentence is not an automatic disqualification for employment. I agree to submit to any drug or alcohol testing prior to or after employment, and I agree to submit to a medical evaluation, if required. I consent to the release of medical information or records **ONLY** deemed necessary to determine my capability to perform the essential job functions of the position for which I may hold. I understand that this is an Equal Opportunity Employer and committed to excellence through diversity.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

**SIGNATURE** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_