



Personal Data

Name:		
First	Last	Middle Initial
Present Address:		
City:	State:	Zip:
Telephone:	Cell:	
Social Security No:		
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a citizen of the U.S. or otherwise legally eligible for employment in the U.S.*? <input type="checkbox"/> Yes <input type="checkbox"/> No		

*Applicants are required to furnish proof of identity and legal work authorization prior to hire.

Occupational Objectives

Position Applying For:	_____	
Required Wage/Salary:	_____	
Employment Desired:	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time <input type="checkbox"/> Both/Either
Hours/Days Available:	_____	
Willing to Work Overtime:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you able to perform the essential functions of the job for which you are applying, with or without accommodations?
Willing to Work On-Call:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date Available to Start:	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Have you previously applied with ServiceMaster? Yes No

Have you worked for ServiceMaster before? Yes No

If Yes – Which ServiceMaster Company? _____

Who referred you to ServiceMaster? _____



Work History

Please list your work experience for the past five years beginning with your most recent job held. Attach additional sheets if necessary.

Name of Company:		Dates of Employment:	
Address:		Pay/Salary	
		Start:	Final:
Telephone:	Supervisor:		
List the main duties performed, skills used or learned, advancements or promotions:			
Reason for Leaving:			<input type="checkbox"/> Ok to Contact

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Address:		Pay/Salary	
		Start:	Final:
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Reason for Leaving:			<input type="checkbox"/> Ok to Contact



An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Please use the space below to summarize any additional information you feel would help describe your full qualifications for the specific position for which you are applying.

Military Service

Have you ever been in the Armed Forces? Yes No

Are you now a member of the Armed Forces? Yes No

Specialty: _____ Date Entered : _____ Discharged Date: _____

References

Please list two personal references that are not related to you.

Name:		Position:	
Company:		Telephone:	
No. of Years Known:		Relationship:	

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Company:		Telephone:	
No. of Years Known:		Relationship:	

Education

	Name	# of Years Completed	Major/Degree
High School			
College			
Business/Trade School			
Professional School			
Other			

