

Employment Application

(For Use By QualityPro Employers)

Today's Date _____

This Is A Drug-Free Workplace Offering Equal Employment Opportunities

ABOUT YOU

Last Name	First Name	Middle Initial	Social Security Number
Address	City/State	Zip Code	Phone Number

YOUR WORK HISTORY AND ANY EMPLOYMENT GAPS

List most recent job first. You must include any gaps in employment, with a full explanation and dates for the gap. You must also provide a complete work history for a minimum of 15 years, if applicable.

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

We do not discriminate on the basis of race, creed, color, sex, religion, age, national origin, disability, citizenship status, veteran status, or any other class protected by state, county, local, or federal regulations.

MORE OF YOUR WORK HISTORY AND ANY EMPLOYMENT GAPS

Remember! You must include any gaps in employment, with a full explanation of the gap and you must provide a complete work history for a minimum of 15 years, if applicable.

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

TELL US ABOUT YOURSELF

You must answer every question. If a question does not apply, put "N/A"

1. What position are you applying for? _____
2. What is your salary expectation? \$ _____ When can you start work? (Date) _____
3. How were you referred to us? _____
4. Have you completed an application here before? Yes No If yes, date/location _____
5. Have you ever been employed here before? Yes No If yes, date/position/location _____
6. Are you available to work (*check any that apply*): Full-time Part-time Temporary Weekends
7. Are there any days or times during the week that you are not available to work? Yes No
8. If yes, please list the days/times you are not available to work _____
9. Are you willing to work overtime? Yes No Are you at least 18 years old? Yes No
10. Are you willing to travel? Yes No What percentage of time? _____
11. Do you have steady transportation to work? Yes No Are you employed now? Yes No
12. May we contact your present employer? Yes No Are you on a layoff and subject to recall? Yes No
13. Why do you desire to make a change? _____
14. How much time have you lost from work during the past 12 months? _____
15. Have you ever been terminated or asked to resign from a job? Yes No
If yes, explain _____
16. Are you legally eligible to work in the United States? Yes No (*Proof of citizenship status/identity required upon hire.*)
17. Have you ever been convicted of or have you ever received a sentence for a crime(s) other than a minor traffic violation?
 Yes No (*Answering "yes" is not an automatic bar to employment.*)
If yes, for each, list type of conviction/sentence, date of the offense, court, and place where the offense occurred: _____

18. Do you hold a valid Driver's License? Yes No If yes, note the state _____
19. 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. _____

20. What three things are most important to you in a job? 1) _____ 2) _____ 3) _____
21. What three adjectives best describe you? 1) _____ 2) _____ 3) _____
22. Have you ever been disciplined at any job for an act of violence, harassment, or discrimination? Yes No
If yes, explain the circumstances, employer, and date _____
23. What type of work do you most enjoy? _____

SPECIAL SKILLS AND QUALIFICATIONS

Do you have any special skills, training, or experience that might help you qualify for this job? Yes No

If yes, please explain: _____

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

What foreign languages do you fluently speak, read, and/or write that would relate to the work here?

EDUCATIONAL BACKGROUND

Schooling	Did You Graduate?	Years Completed	Degree Received & Major Subject	Name of School	Location
Grammar or High School	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Trade, Business, or Correspondence	<input type="checkbox"/> Yes <input type="checkbox"/> No				
College	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Graduate School	<input type="checkbox"/> Yes <input type="checkbox"/> No				

MILITARY SERVICE

Branch of Service

Rank at Discharge, If Applicable

List Duties and Special Training

AGREEMENT AND RELEASE

For the purpose of this agreement and release, the organization that has provided you with this application is referred to as "the company" or "this company." The facts set forth above in my application for employment are true and complete. I understand that false statements or omission of information on this application or any other employment form may lead to dismissal or denial of employment. The company is hereby authorized to make any investigation of my personal history, financial, criminal, credit, and motor vehicle records through any investigative or credit agencies or bureaus of your choice. The company is also authorized to administer personality profile tests and verify my background. 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.

In making this application for employment, I also understand that an investigative report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. In exchange for the consideration of my employment application by this company, I hereby release and forever discharge this company (including its directors, officers, employees, and agents) and my past and/or present employers (their directors, officers, employees, and agents) from any liabilities which may result from an investigation of my past and/or present employment or from the disclosure of such information. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for this company to hire me. If hired, I understand that employment with this company at all times is employment "at will." I understand that either the company or I can terminate my employment at any time and for any reason, with or without cause and without prior notice, and includes no guarantee, contract, or promise of employment for any specific length of time. I understand that no representative of the company has the authority to make any assurance to the contrary.

I understand that no individual (except an owner) has the authority to extend a verbal offer of employment; otherwise an offer of employment is valid only in the form of a written offer letter.

Signature of Applicant _____ **Date** _____

“UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.”

SIGNATURE OF APPLICANT

DATE

(THIS STATEMENT MUST BE ATTACHED TO ALL EMPLOYMENT APPLICATION IN THE STATE OF MARYLAND)



Termite and Pest Control Service Since 1925

Affirmative Action Program Applicant Information Form

American Pest Management is an Equal Opportunity Employer. As required by law, we must record certain information to be made a part of our Affirmative Action Program.

Applicants for employment are invited to participate in the Affirmative Action Program by reporting their status as handicapped, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage women, minorities, veterans, and persons with disabilities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

Section 1: General Applicant Information

Name	Date _____/_____/_____
Position applied for	

Section 2: Please check all that apply (See reverse for definitions)

Race or Ethnic Identity	Gender	Veteran Status
<ul style="list-style-type: none"> • Hispanic or Latino • White (not Hispanic or Latino) • Black or African American (not Hispanic or Latino) • Native Hawaiian or Pacific Islander (not Hispanic or Latino) • Asian (not Hispanic or Latino) • American Indian or Alaskan Native (not Hispanic or Latino) • Two or More Races (not Hispanic or Latino) 	<ul style="list-style-type: none"> • Male • Female 	<ul style="list-style-type: none"> • Vietnam Era Veteran • Special Disabled Veteran • Other Eligible Veteran
		<p>Other</p> <ul style="list-style-type: none"> • Individual with Disabilities
<p>• I do not wish to Self-Identify Signature _____</p>		
<p>How did you hear of our opening?</p>		

• Referred by Employee • Newspaper Ad • Recruiter • Other _____

EEOC RACE/ETHNIC IDENTIFICATION CATEGORIES

Hispanic or Latino

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino)

A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino)

A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)

A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino)

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino)

A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino)

All persons who identify with more than one of the above five races.

Individual with Disabilities

Defined as a person who (1) has a physical or mental impairment which substantially limits one or more of his or her major life activity(s), (2) has a record of such impairment(s), or (3) is regarded as having such impairment(s). For purposes of this definition, an individual with disability(s) is substantially limited if he or she is likely to experience difficulty in securing, retaining, or advancing in employment because of the disability(s).

Special Disabled Veteran

Defined as a veteran who is entitled to disability compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Veterans Administration for a disability (i) rated at 30% or more, or (ii) rated at 10 or 20% in the case of a veteran who has been determined under Section 1506 to have a serious employment disability, or a person who was discharged from active duty because of a service-connected disability.

Veteran of the Vietnam Era

Defined as a veteran who (a) served on active duty in the Republic of Vietnam between February 28, 1961 and May 7, 1975, or (b) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged or released therefrom with other than a dishonorable discharge, or (c) was discharged or released from active duty for a service-connected disability if any part of his or her active duty was performed between August 5, 1964 and May 7, 1975.

Other Eligible Veteran

Defined as any veteran who served in a "war" declared by Congress, in a campaign or on an expedition for which a campaign badge, a service medal, or an expeditionary medal has been awarded.