



5 Star Window Cleaning

AN EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR EMPLOYMENT

In order for you to be considered for employment, this application must be filled out in its ENTIRETY. Resumes, though certainly welcome, should not be submitted in lieu of information requested below.

GENERAL

PLEASE PRINT

Date: _____
Month Date Year

Name: _____ Social Security No: _____ / _____ / _____
First Middle Last

Present Address: _____
Street City State Zip

Permanent Address: _____
Street City State Zip

Age: _____ Birth Date: _____
Month Day Year Day Phone: () Evening Phone: ()
 If none, give contact number.

Are you legally able to work in the United States? Yes No (Proof of identity and legal authority to work in the U.S. is a condition of employment.)

Who referred you to Five Star Window Cleaning? _____ Date available for employment _____

Have you ever been convicted of a felony which has not been annulled or sealed by a court? Yes No If yes, please explain above:
(Convictions will not necessarily exclude you from employment, but date and type of conviction may be considered for job placement.)

Relatives Employed by Five Star Window Cleaning:
Name Location Relationship

WORK SCHEDULE AVAILABILITY

MON	TUES	WED	THUR	FRI	SAT
to	to	to	to	to	to

How many hours per week do you expect to work? _____

EDUCATION

Type of School	Name of School	Location of School	Courses Majored in	Last Year Completed		
High School				9 10 11 12	Diploma Yes <input type="checkbox"/> No <input type="checkbox"/>	Grade Avg.
College/ Other				1 2 3 4	Degree Yes <input type="checkbox"/> No <input type="checkbox"/>	Grade Avg.



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VOLUNTEER & MILITARY EXPERIENCE

Volunteer Experience: (Exclude activities relating to race, religion, color, ancestry, age, national origin, gender or disability.) _____

Skills Acquired: _____

U.S. Military Experience: (If applicable) _____

Skills Acquired: _____

BUSINESS EXPERIENCE

(List most recent three employers)

Present Employer (or most recent)	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address		Your Position			
City	State	Zip Code	Wage Start	Wage End	Reason For Leaving
Previous Employer	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address		Your Position			
City	State	Zip Code	Wage Start	Wage End	Reason For Leaving
Previous Employer	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address		Your Position			
City	State	Zip Code	Wage Start	Wage End	Reason For Leaving

I UNDERSTAND THIS DOCUMENT IS NOT A CONTRACT OR GUARANTEE OF EMPLOYMENT WITH 5 STAR WINDOW CLEANING.

DATE _____ SIGNATURE OF APPLICANT _____

I UNDERSTAND THAT MY APPLICATION WILL REMAIN ACTIVE FOR 30 DAYS FROM THE DATE RECEIVED.