

Employment Application

Applicant Information						
Full Name:						Date:
	Last	First			M.I.	
Address:						
	Street Address					Apartment/Unit #
	City				State	ZIP Code
		_				
Phone:		E	mail			
Date of Birth	n:					
Do you have	e a valid Texas Driver Lic	ense? <u>Yes</u> N	0	TDL#:		
Expiration D	ate:					
Expiration	die. ———					
Date Availab	ole:	Social Security No.:			Desired	l Salary <u>:</u>
Position App	olied for:					
		YES NO				
Are you auth	norized to work in the U.S					
		YES NO				
Have you ev	ver worked for this compa		If yes, v	when?		
	ver been convicted of a fe					
	involving moral turpitude honesty, theft, sexual ass					
inolades als	noncoty, there, octaal as	saut :				
If yes, expla	in:					
• •						
		Educa	ation			
High School	:	Address:_				
Erom:	To:	Did you graduate?	YES	NO	Diploma	
	10	Did you graduate?			ырюна. <u> </u>	
College:		Address:_				
			YES	NO	_	
From:	To:	Did you graduate?			Degree:	
Other:		Address:				
			YES	NO		
From:	To:	Did you graduate?			Degree:	



	R	eferences			
Please list three	e professional references.				
Full Name:				Relationship:	
Company:				Phone:	
Address:					
Full Name:				Relationship:	
0				Phone:	
Address:					
Full Name:				Relationship:	
				Phone:	
Address:					
	En	nployment	-	_	
CURRENT EMP					
Camara a				Phone:	
A .ll				2	
Job Title:	Starti	ing Salary: \$		Ending Salary: \$	
Responsibilities:	:				
From:	To:	Reason fo	or Leaving:		
May we contact	your supervisor for a reference?	YES	NO		
PREVIOUS EMI	PLOYER(S):				
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starti	ing Salary: \$		Ending Salary:	
Responsibilities:	:				
From:	To:	Reason fo	or Leaving:		
May we contact	your previous supervisor for a reference	e? YES	NO		



Address: Job Title: Starting Salary: Responsibilities: To: Reason for Leaving	Supervisor:Ending Salary:\$
Responsibilities:	_
From: To: Reason for Leavin	
	ng:
May we contact your previous supervisor for a reference? YES NO	
Company:	Phone:
Address:	
Job Title: Starting Salary:	Ending Salary: <u>\$</u>
Responsibilities:	
	ng:
Company:	Phone:
Address:	Supervisor:
lob Title: Starting Salary:	Ending Salary: <u>\$</u>
Responsibilities:	
From: To: Reason for Leavin	ng:



General YES NO Are you able to perform the essential duties of the job with or without reasonable accommodations? YES NO Do you have a reliable method of getting to work? Have you had any traffic violations in the last 4 years? YES NO If yes, please list: Are there any restrictions on your Driver's License? YES NO If yes, please list: Do you have relatives working for this company? YES NO If so, Name: What languages do you speak and write fluently? What are your hobbies?



Gillen Pest Control, Inc. is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Gillen Pest Control, Inc. complies with applicable state and local laws governing nondiscrimination in employment in every jurisdiction in which it maintains facilities. Gillen Pest Control, Inc. also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED:		DATE:	
	_		



Disclaimer and Signature