**EMPLOYMENT APPLICATION**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |
|  | **PLEASE PRINT OR TYPE** |  |  |  |  |  | **Date:** |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | *First Name* |  | *MI* |  | *Last Name* | | |  | *Preferred Name/Nickname* |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | ***Street Address*** |  | ***Apt #*** |  | ***City*** |  | ***State*** |  | ***Zip Code*** |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | ***Home/Cell Phone*** |  | ***Email Address*** | | |  | ***Date of Birth*** |  | ***Social Security Number*** |  |
|  |  |  |  |  |  |  |  |  |  |  |
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|  |  | |  | |  |  | | |  |  | | |  |  | |  | |  |  |
|  | **PLEASE PLACE A CHECK BY YOUR RESPONSE OR PROVIDE THE APPROPRIATE INFORMATION** | | | | | | | | | | | | | | | | | |  |
|  |  | | | |  |  | | |  |  | | |  |  | |  | |  |  |
|  | **Are you interested in:** | | | |  |  | | |  | **Full Time** | | |  | **Part Time** | |  | | **Temporary** |  |
|  |  | | |  |  |  | | |  |  | | |  |  | |  | |  |  |
|  | **What schedule would you prefer**? | | |  |  | **Weekdays** | | |  | **Weekends** | | |  | **Evenings** | |  | | **Nights** |  |
|  |  | | |  |  |  | | |  |  | | |  |  | |  | |  |  |
|  |  |  | | |  |  | |  |  | |  | | | |  | |  | |  |
|  | **Desired Pay:** | **Hourly Pay** | | |  | $ | |  | **Date available:** | | |  | | |  | |  | |  |
|  |  |  | | |  |  | |  |  | |  | | | |  | |  | |  |
|  | **What local area do you prefer to work?** | | | |  |  | |  |  | | **Position desired:** | | | |  | | | | |
|  |  |  | | |  | |  |  |  | |  | | | |  | |  | |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PLEASE CHECK YES OR NO TO THE FOLLOWING:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Have you ever worked for ICCG, Inc.?** |  |  | Yes |  | No | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | If yes, when? |  |  |  |  |  | |  |  |  |  |  |      |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Are you under 18 years of age?** |  |  | Yes |  | No |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Are you authorized to work in the United States?** |  |  | Yes |  | No |   **Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. ICCG, Inc. will verify the status of every individual offered employment with the Company**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **If yes, can you furnish a work permit?** |  |  | Yes |  | No |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Are you capable of performing the essential functions of the job for** |  |  | Yes |  | No |   **which you are applying with or without a reasonable accommodation**? |

**PREVIOUS EMPLOYMENT (MOST RECENT JOB FIRST)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | Company Name | | | Your Position & Title | |
| From   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Street Address | | | Supervisor’s Name, Title & Position | |
|  | City | State | Zip Code | Supervisor’s Phone Number | |
|  | Type of Business | | Starting Pay  $ | | Final Pay  $ |
| To   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Phone Number | | Termination   |  |  | | --- | --- | |  | Voluntary | |  | Involuntary | | | Reason |
|  | Briefly describe your MAJOR duties and REASON(S) FOR TERMINATION | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2** | Company Name | | | Your Position & Title | |
| From   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Street Address | | | Supervisor’s Name, Title & Position | |
|  | City | State | Zip Code | Supervisor’s Phone Number | |
|  | Type of Business | | Starting Pay  $ | | Final Pay  $ |
| To   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Phone Number | | Termination   |  |  | | --- | --- | |  | Voluntary | |  | Involuntary | | | Reason |
|  | Briefly describe your MAJOR duties and REASON(S) FOR TERMINATION | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **3** | Company Name | | | Your Position & Title | |
| From   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Street Address | | | Supervisor’s Name, Title & Position | |
|  | City | State | Zip Code | Supervisor’s Phone Number | |
|  | Type of Business | | Starting Pay  $ | | Final Pay  $ |
| To   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Phone Number | | Termination   |  |  | | --- | --- | |  | Voluntary | |  | Involuntary | | | Reason |
|  | Briefly describe your MAJOR duties and REASON(S) FOR TERMINATION | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **4** | Company Name | | | Your Position & Title | |
| From   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Street Address | | | Supervisor’s Name, Title & Position | |
|  | City | State | Zip Code | Supervisor’s Phone Number | |
|  | Type of Business | | Starting Pay  $ | | Final Pay  $ |
| To   |  |  |  | | --- | --- | --- | |  | / |  | | Month |  | Year | | Phone Number | | Termination   |  |  | | --- | --- | |  | Voluntary | |  | Involuntary | | | Reason |
|  | Briefly describe your MAJOR duties and REASON(S) FOR TERMINATION | | | | |

**EDUCATION:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name and Address of School** | **Major** | **Graduate?** | **Type of Degree or Diploma** |
| High School or Prep |  |  |  |
| College |  |  |  |
| Other |  |  |  |

**MILITARY SERVICE**

|  |  |  |  |
| --- | --- | --- | --- |
| Branch | Type of Discharge | Rank at Discharge | Dates of Service  From To |

**REFERENCES: Please list three (3) professional references**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Relationship | Company | Phone Number |
|  |  |  |  |
|  |  |  |  |
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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PLEASE READ CAREFULLY BEFORE SIGNING 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.  **References:** I hereby authorize **ICCG, Inc.** 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.  **Temporary/Contract Employment:** If employed as a temporary/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:** |  |  |  | |

Please email the completed form to [Operations@iccgrpinc.com](mailto:Operations@iccgrpinc.com) or fax to 856-541-7243.

Once reviewed, we will be in contact with you about next steps.

Thank you for your interest in Industrial Commercial Cleaning Group, Inc.