



Apelila's In&Out Cleaning
 618 Ihe Street
 Honolulu, HI 96817
 808-782-5723
apply@apelilas.com

EMPLOYMENT APPLICATION

We are an equal opportunity employer. We do not discriminate in hiring or terms and conditions of employment because of an individual's race, color, religion, gender, gender identity, national origin, citizenship, age, disability, sexual orientation, marital status, arrest and court record or any other protected category recognized by Hawaii or federal laws. We only hire individuals authorized for employment in the United States.

Directions: You must fill in this form completely to be considered for employment with this company. Please print neatly.

Position Applying for: _____ Date of Application: _____

Personal Information

Last Name	First	Middle	Home Phone
Street Address		Apt#	Cell Phone
City	State	Zip Code	Email

Are you at least 18 years old? Yes No Can you, after employment, submit proof of age? Yes No

Can you verify your legal right to work in the U.S. by providing appropriate documentation? Yes No
(If offered employment, proof of U.S. citizenship or the right to work in the United States will be required.)

Have you ever been convicted of a crime (felony or misdemeanor)? Yes No If YES, explain & date nature of offense and results of conviction.

Note: A conviction will not necessarily disqualify you from the position from which you have applied.

Emergency Contact

Name: _____ Address: _____ Phone: _____

Preferences

Date available for work: _____ Salary or hourly rate desired: _____

Availability: Full-time Part-time On call Day shift Afternoon/Evening shift Night shift

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
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Have you had any accidents during the past three years? Yes No If yes, please explain

Have you had any moving violations during the past 3 years? Yes No If yes, please explain & date offense

Education / Certificates / Training

Type of School	School Name and Address	Years Completed	Major	Degree	Graduated
High School					<input type="checkbox"/> Yes <input type="checkbox"/> No
College					<input type="checkbox"/> Yes <input type="checkbox"/> No
Other					<input type="checkbox"/> Yes <input type="checkbox"/> No

Other training and/or skills related to the position applying for

Employment Record List your complete full-time and part-time employment record. Begin with you current or most recent employer.

Are you currently employed? Yes No

1. Company Name _____ Phone _____
 Street Address _____ City _____ State _____ Zip _____
 Supervisor's Name _____ Job Title _____ From / To /
 Job Responsibilities _____

May we contact this employer? Yes No Starting Salary _____ Ending Salary _____ Reason for Leaving _____

2. Company Name _____ Phone _____
 Street Address _____ City _____ State _____ Zip _____
 Supervisor's Name _____ Job Title _____ From / To /
 Job Responsibilities _____

May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Starting Salary	Ending Salary	Reason for Leaving	
3. Company Name			Phone	
Street Address		City	State	Zip
Supervisor's Name		Job Title	From /	To /
Job Responsibilities				

May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Starting Salary	Ending Salary	Reason for Leaving	
4. Company Name			Phone	
Street Address		City	State	Zip
Supervisor's Name		Job Title	From /	To /
Job Responsibilities				

May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Starting Salary	Ending Salary	Reason for Leaving	
5. Company Name			Phone	
Street Address		City	State	Zip
Supervisor's Name		Job Title	From /	To /
Job Responsibilities				

May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Starting Salary	Ending Salary	Reason for Leaving	
Have you ever been discharged from a job(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details, including place(s) of employment, location(s), date(s), supervisor's name(s), and circumstances of the discharge(s): _____				

Professional References Please provide at least three (3) work references who are not related to you in addition to those indicated above.

Name / Title	Company / Address	Telephone Number(s)

PLEASE READ THIS STATEMENT CAREFULLY

I hereby affirm that the information given by me on the application for employment is complete and accurate. I understand that any falsification or omission either on this application, or otherwise providing false information to the Company will be immediate grounds for dismissal, no matter when the falsification or omission is discovered. I authorize a thorough investigation to be made in connection with this application concerning my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, employment, education, and criminal record, whichever may be applicable for employment purposes. I understand this investigation may include personal interview with third parties such as family members, business associates, financial sources, friends, neighbors, and others with whom I am acquainted. I further understand I have the right to make a written request within a reasonable period of time for complete and accurate disclosure of the nature and scope of the investigation.

It is my understanding that as a prerequisite to consideration for employment, I must agree to submit to any physical examinations, drug test, and pre-employment evaluations as the Company may lawfully require. I also understand that I will be required to provide information for compliance with the Immigration Reform and Control Act.

In consideration of my employment, I agree to conform to the rules and standards of the Company and agree that my employment and compensation can be terminated with or without cause, and without notice at any time, at the option of the Company or myself.

I have read and affirm as my own the above statements.

APPLICANT SIGNATURE **DATE**