Employment Application

Please complete the entire application.

1. Employer Information
Employer: Bellas Beautiful Homes Address:
City/State/ZIP: Modesto, California 95356 Telephone: 683547
It is the policy of Bellas Beautiful Homes to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.
2. Applicant Information
Applicant Full Name:
Home Address:
City/State/ZIP:
Number of years at this address:
Daytime Phone: Evening Phone:
Mobile Phone:
Social Security Number:
Driver's License (State/Number):
3. Emergency Contact
Who should be contacted if you are involved in an emergency?
Contact Name:
Relationship to you:
Address:
City/State/ZIP:
Daytime Phone: Evening Phone:
4. Job Position Applied For: House Cleaner
5. Are you at least 18 years old? Yes No
6. How will you get to work?

7. Are you willing to work any shift, including nights If no, please state any limitations:	and weekends?Yes _	No
8. If you are offered employment, when would you be	available to begin work?	
9. If hired, are you able to submit proof that you are leg employment in the United States? Yes		
10. Applicant's Skills		
Check those skills that you have. List any other skills t seeking. Enter the number of years of experience, and ability for each particular skill. (One represents poor at ability.)	circle the number that corres	ponds to your
		Ability
Skill [] Customer service	Years of Experience	or Rating 1 2 3 4 5
[] Time Management		1 2 3 4 5
[] Team Player		12345
[]Can recognize and differentiate between differer		12345
		1 2 3 4 5
11. Applicant Employment History		
List your current or most recent employment first. Pleas and military service) that you have held, beginning with gaps in employment. If additional space is needed, cor	n the most recent, and list and	explain any
Employer Name:		
Supervisor Name:		
Address:		
City/State/ZIP:		
Job Duties:Reason for Leaving:		
Dates of Employment (Month/Year):		

Employer Name:
Supervisor Name:
Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
Employer Name:
Supervisor Name:
Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
12. References
List any two non-relatives who would be willing to provide a reference for you.
Name:
Address:
City/State/ZIP:
Telephone:
Relationship:
Name:
Address:
City/State/ZIP:
Telephone:
Relationship:
13. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

Certification

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for the rejection of my application or, if employment commences, immediate termination.

I authorize Bellas Beautiful Homes to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Business Owner, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Bellas Beautiful Homes, except in a specific written contract of employment signed on behalf of the organization by its Business Owner, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE AND AGREE TO ITS TERMS.	E CERTIFICATION, AND I UNDERSTAND
Applicant Signature	 Date