



Employment Application

Instructions: Please complete both sides of this page.

Print clearly. If you need help, please ask! All qualified applicants will receive consideration without discrimination based on sex, marital status, race, color, age creed, national origin, sexual orientation, military reserve membership, ancestry, religion, height, weight, use of a guide or support animal because of blindness or deafness or physical handicap, or the presence of disabilities. Additional testing of job-related skills and for the presence of drugs in your body may be required prior to or during employment.

POSITION **APPLIED FOR** _____ DATE _____

NAME _____

ADDRESS _____ ZIPCODE _____

PHONE _____ SOCIAL SECURITY # _____

EMAIL _____

EDUCATION: LIST COURSES OR DEGREES _____

AVAILABILITY_What date can you start? _____ Are

you able to work from 12:00 noon to 7pm Monday through Saturday? YES NO

Are you able to work from 7:00 am to 3:00 pm Monday through Saturday? YES NO

Are you able to work a combination of the shifts as described above? YES NO

What locations or areas of town can you work in? If you can only work or strongly desire to work at one store or one part of town please indicate so.

Sabino Canyon/Tanque Verde Swan/Sunrise Ajo Way/12th Ave Oracle/Orange Grove
Campbell/Glenn

If the job requires it, do you have the appropriate valid driver's license? Y/N What characteristics do you have that would make you a **positive addition** to the team at Shaffer Dry Cleaning? Include skills, training, experience.

SECURITY

Have you been convicted of a crime in the past seven years? If so, please describe below. (Conviction will not necessarily be a bar to employment.)

Incident	City/State	Charge

Do you smoke cigarettes? YES NO Have you received the Covid-19 vaccine? YES NO

PREVIOUS EMPLOYERS Your application will not be considered unless every question in this section is answered. Since we will make every effort to contact previous employers, the correct telephone numbers of past employers are critical.

RECENT EMPLOYER Currently working for this employer? Y/N May we contact? Y/N

Company Name _____

Phone _____ City _____ State _____

Supervisor _____ Dates employed from _____ to _____

Job title _____

Duties _____

Wages _____ per hour. Reason for leaving _____

2nd MOST RECENT EMPLOYER

Company Name _____

Phone _____ City _____ State _____

Supervisor _____ Dates employed from _____ to _____

Job title _____

Duties _____

Wages _____ per hour. Reason for leaving _____

3rd MOST RECENT EMPLOYER

Company Name _____

Phone _____ City _____ State _____

Supervisor _____ Dates employed from _____ to _____

Job title _____

Duties _____

___ Wages _____ per hour. Reason for leaving _____

REFERENCES _____

CERTIFICATION and RELEASE

I understand that any false information, omissions or misrepresentations of facts called for in this application or during the interview, whether in this document or not, may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents, to verify this information.

Signature _____ date _____