

CLEANING TECHNOLOGIES INC.

Application For Employment

Cleaning Technologies Inc. is an Equal Opportunity Employer and is committed to excellence through diversity.

The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name

Address		City	State	Zip
Phone Number	Mobile Number	Email Address		
Are You A U.S. Citizen?		Have You Ever Been Convicted Of A Felony?		
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

If Selected, are You Willing To Submit to Pre-Employment and Random Drug Testing while employed?

Yes No

Position

Position You Are Applying For	Available Start Date	Desired Pay
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Employment Desired

Full Time Part Time Seasonal/Temporary

Education

School Name	Location	Years Attended	Degree Received	Major
			Diploma	GED

References

Name	Title	Company	Phone

Employment History

Employer (1)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (2)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (3)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (4)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (5)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Print)	Signature
Date	



By signing this form, you agree to allow Cleaning Technologies Inc. (CTI) to perform a criminal background check to be paid for by CTI. Also, you are acknowledging and agreeing to comply with random drug testing while employed with CTI.

Signature of employee

Date

Al firmar este formulario, usted acepta permitir Cleaning Technologies Inc. (CTI) para llevar a cabo una verificación de antecedentes penales a cargo de CTI. También, están reconociendo y aceptando cumplir con las pruebas de drogas al azar mientras trabajaba con CTI.

Firma del empleado

Fecha

DIRECT DEPOSIT FORM

Your name_____

Bank name_____

Bank account number_____

Bank routing number_____
(9 digits before account number on your check)

Checking or Savings (circle one)

Email address_____

Please return this form to Dave, David Jr or Beth.

Su nombre_____

Nombre de su Banco_____

Numero de su cuenta bancaria_____

Numero de su ruta de cuenta_____
(routing number/los 9 digitos antes de su numero de su cuenta en su chequera)

Escoger si le ponemos su dinero en sus Cheques o Ahorros

Su correo electronico_____

Por favor devuelva este formulario a Dave, David Jr. o a Beth.