

Thuro Clean Carpet & Upholstery LLC
4540 Homeplace Circle
Myrtle Beach SC 29588
Phone: (843)903-6895

Application For Employment

Name _____
Last First Middle

Address _____

Phone _____
Social Security Number _____

Are you 18 or older? _____
Are you presently employed? _____
Are you eligible to work in the U.S.? _____
(Proof of eligibility will be required upon employment.)

*It is the policy of Thuro Clean Carpet & Upholstery LLC.
to provide employment opportunities without regard
to race, color, religion, sex, national origin, or age
It is also our policy to comply with applicable laws
and regulations protecting the employment of
veterans and handicapped persons.*

Position Applied For

Earliest date you can work _____
Is there a minimum salary you would accept? _____
If yes, \$ _____ per _____

Check the type of work you would accept: Full Time _____ Part Time _____ Temp _____

Have you ever been employed with us before? _____

Education/ Training

Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12
College: 1 2 3 4
Do you have a High School Diploma or GED? _____

Driving History

Do you have a valid driver's license? _____ License Number _____
St. _____
Exp. _____

Have you ever been convicted of a crime other than a minor traffic violation? _____
If yes, please explain the offense you were charged with.

Employment History

Current or most recent position:

Employer's Name: _____
Address: _____ City _____ St. _____ Zip _____
Telephone Number: _____ Supervisor's Name: _____
May we contact? _____ Description of specific Duties: _____

Dates Employed in this position _____ mo _____ yr TO _____ mo _____ yr
Reason for leaving: _____

Employer's Name: _____
Address: _____ City _____ St. _____ Zip _____
Telephone Number: _____ Supervisor's Name: _____
May we contact? _____ Description of specific Duties: _____

Dates Employed in this position _____ mo _____ yr TO _____ mo _____ yr
Reason for leaving: _____

Employer's Name: _____
Address: _____ City _____ St. _____ Zip _____
Telephone Number: _____ Supervisor's Name: _____
May we contact? _____ Description of specific Duties: _____

Dates Employed in this position _____ mo _____ yr TO _____ mo _____ yr
Reason for leaving: _____

Employer's Name: _____
Address: _____ City _____ St. _____ Zip _____
Telephone Number: _____ Supervisor's Name: _____
May we contact? _____ Description of specific Duties: _____

Dates Employed in this position _____ mo _____ yr TO _____ mo _____ yr
Reason for leaving: _____

References

	Name:	Address:	Phone:
1.	_____		
2.	_____		
3.	_____		

CERTIFICATE OF APPLICANT: I hereby declare the information provided by me in the Application for Employment is true, correct and complete. I understand that if employed and false statement, misstatement, or omission of fact may result in my being disqualified or my being discharged.

Applicant's Signature: _____
Date: _____

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