

# ESS-Environmental Services Solutions

## EMPLOYMENT APPLICATION

Last Name:	First Name:	Middle Name:	
Current Address:			
City:	State:	ZIP	Phone Number:

Date: \_\_\_\_\_ Position Applied: \_\_\_\_\_ Availability \_\_\_\_\_

Position desired:

Management \_\_\_\_\_  
Non-Management \_\_\_\_\_  
Full -time \_\_\_\_\_ Part-time \_\_\_\_\_ On-call \_\_\_\_\_

What other position you would like to be considered for? \_\_\_\_\_

Salary Desired \_\_\_\_\_ Location \_\_\_\_\_

Are you legally entitled to work in the US?

\_\_\_\_\_

How did you find out about ESS?

Ad: \_\_\_ Web: \_\_\_ Friend: \_\_\_ Agency: \_\_\_ Employee: \_\_\_ Other: \_\_\_

Describe the source: \_\_\_\_\_

Can you work  
overtime? \_\_\_\_\_

Have you ever been convicted of any felonies within the past seven (7) years? YES \_\_\_\_\_ NO \_\_\_\_\_

Note: A conviction will not necessarily disqualify a candidate from employment.

If your answer to the above is YES, please give date and location of conviction(s): \_\_\_\_\_

\_\_\_\_\_

Are there any restrictions on days and shift schedules? YES \_\_\_\_\_ No \_\_\_\_\_ Explain \_\_\_\_\_

EDUCATION

<b>SCHOOL TYPE</b>	<b>NAME AND ADDRESS</b>	<b>DATES</b>	<b>GRADUATED YES      NO</b>	<b>TYPE OF DEGREE , DIPLOMA OR CERTIFICATE</b>	<b>MAJOR, MINOR</b>
<b>HIGH SCHOOL</b>		Month: Year:	YES ___ NO ___		
<b>COLLEGE UNIVERSITY</b>		Month: Year:	YES ___ NO ___		
<b>OTHER EDUCATION</b>		Month: Year:	YES ___ NO ___		

Please list all other academic achievements and activities. Include honors, scholarships, volunteer work and any other types of participation in extracurricular activities you consider important.

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Please list licenses and/or professional and academic affiliations, if any.

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EMPLOYMENT HISTORY

It is extremely important that you provide information on the past 5 years or last four employers, whichever cover a longer period of time. Please include military service, summer and part-time jobs. Start from your most recent employer to your former employers and remember to include any periods in which you were not employed. Information must be completed in detail even if candidate's resume is provided.

<b>COMPANY NAME, ADDRESS &amp; PHONE NO.</b>		<b>DATE STARTED</b>	<b>DATE LEFT</b>	<b>STARTING POSITION</b>
<b>STARTING SALARY:</b>	<b>FINAL SALARY:</b>	<b>FULL TIME</b>	<b>PART TIME</b>	<b>LAST POSITION</b>
<b>RESPONSIBILITIES:</b>				
<b>REASON FOR LEAVING:</b>				
<b>NAME OF SUPERVISOR, TITLE AND PHONE NO.:</b>				
<b>ADDITIONAL REFERENCES AND PHONE NUMBER(S):</b>				

<b>COMPANY NAME, ADDRESS &amp; PHONE NO.</b>		<b>DATE STARTED</b>	<b>DATE LEFT</b>	<b>STARTING POSITION</b>
<b>STARTING SALARY:</b>	<b>FINAL SALARY:</b>	<b>FULL TIME</b>	<b>PART TIME</b>	<b>LAST POSITION</b>
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<b>COMPANY NAME, ADDRESS &amp; PHONE NO.</b>		<b>DATE STARTED</b>	<b>DATE LEFT</b>	<b>STARTING POSITION</b>
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<b>RESPONSIBILITIES:</b>				
<b>REASON FOR LEAVING:</b>				
<b>NAME OF SUPERVISOR, TITLE AND PHONE NO.:</b>				
<b>ADDITIONAL REFERENCES AND PHONE NUMBER(S):</b>				

Can we contact sources above to verify past and present employment? Yes\_\_\_\_ No\_\_\_\_

Have you ever been dismissed from employment? Yes\_\_\_\_ No\_\_\_\_

If ever dismissed, please explain causes:\_\_\_\_\_

PROFESSIONAL AND PERSONAL REFERENCES

NAME	OCCUPATION	ADDRESS	TELEPHONE	YEARS KNOWN

OTHER RELEVANT INFORMATION

Please include any information you think would be helpful to ESS in considering you for employment, such as additional skills, accomplishments, etc.

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PLEASE READ THE FOLLOWING AGREEMENT CAREFULLY

I hereby acknowledge that the information provided is accurate and that this application has been completed to the best of my knowledge. I understand and agree that the information provided is subject to validation by ESS-Environmental Services Solutions and that any misrepresentation or omission of a fact in my application may be justification for ESS not to hire me or, if hired, for termination of employment with ESS-Environmental Services Solutions.

Additionally, I understand that an offer of employment and my continued employment with ESS-Environmental Services Solutions are contingent upon satisfactory proof that I am authorized to work in the United States. I understand that nothing contained in the application or any interview with ESS representative(s) is intended to create an employment contract between ESS-Environmental Services Solutions and myself. No promises regarding continued employment have been made to me, and I understand that no such promises is bidding upon ESS unless made in writing. If offered employment with ESS, I understand that my employment is terminable at-will according to California's at-will employment law, and that either my employer or I may terminate the employment at any time, with or without cause, for any or no reason, and that my employment carries no specific term.

I understand that at times business needs make conditions such as overtime, shift work, rotating schedules, and areas necessary and sometimes mandatory. I understand and accept these conditions.

I understand that I may be required to go through a physical examination and to take and pass a drug test as a condition of being hired and assigned to any ESS service location.

Date:\_\_\_\_\_

Name:\_\_\_\_\_

Signature:\_\_\_\_\_

EQUAL EMPLOYMENT OPPORTUNITY

ESS-Environmental Services Solutions is an Equal Employment Opportunity Employer and does not discriminate in employment on the basis of race, color, religion, national origin, sex, age, disability, veteran status or on any other basis protected by law.

AUTHORIZATION AND RELEASE

I authorize a thorough investigation of my educational background, past employment, current employment (unless indicated otherwise on page one of this application), and activities that may relate in any way to my potential fitness for employment with ESS-Environmental Services Solutions. I authorize schools and prior employers to provide any information they possess to ESS, and I hereby hold harmless ESS and all those providing information from any liability that may arise out of or result from the release or use of such information.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_