



Weaver's Sanitation Service, Inc.
349 E Graceville Rd

PLEASE COMPLETE ALL PAGES AND PRINT CLEARLY

Date: _____

Name: _____
Last First Middle Maiden

Address: _____
No. & Street City State Zip Code

Telephone : () _____ Date Of Birth: _____

Social Security No. : ____ - ____ - ____ Email Address: _____

Position Applied For: _____

Were you previously employed by us? Yes No
If yes, when? _____

When are you available to begin work if application is considered? _____

Employment Desired: Full-Time Part-Time Temporary

What hours and days can you work: _____ Hours _____ Days

May we contact your present or previous employers? Yes No

Are you legally eligible for employment in the USA? Yes No

Are you of legal age to work? Yes No

Do you hold a valid driver's license? Yes No

Driver's License Number _____ State of Issue _____ CDL Non-CDL

HAVE YOU EVER BEEN CONVICTED OF A CRIME other than a traffic violation? Yes No

If yes, please explain number of conviction(s), nature of offense(s), how recently such offense(s) was/were committed, and sentence(s):

Have you had any traffic violations or accidents in the past 3 years? Yes No

EDUCATION

Employer: _____
Address: _____
Position: _____
Job Title And Duties Performed: _____
Telephone: (____) ____ - _____
Dates of Employment: From: _____ To: _____
Salary: _____
Supervisor: _____
May we contact this supervisor? Yes No
Reason for Leaving: _____

Employer: _____
Address: _____
Position: _____
Job Title And Duties Performed: _____
Telephone: (____) ____ - _____
Dates of Employment: From: _____ To: _____
Salary: _____
Supervisor: _____
May we contact this supervisor? Yes No

Employer: _____
Address: _____
Position: _____
Job Title And Duties Performed: _____
Telephone: (____) ____ - _____
Dates of Employment: From : _____ To: _____
Salary: _____
Supervisor: _____
May we contact this supervisor? Yes No
Reason for Leaving: _____

Type Of School	Name Of School	Location(Complete mailing address)	No.Yrs Completed	Major & Degree
High School				
College				
Bus. Or Trade School				
Professional School				

Name: _____

Name: _____

Address: _____

Address: _____

Telephone: (____)____ - ____

Telephone: (____)____ - ____

Position: _____

Position: _____

Company: _____

Company: _____

PLEASE READ CAREFULLY
APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Weaver's Sanitation, I agree that:

I understand that, if hired, my employment would be "at will" and could be terminated at any time by either party, with or without cause and with or without notice.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Weaver's Sanitation permission to contact schools, previous employers (unless otherwise indicated), references and others, and hereby release Weaver's Sanitation from my liability as a result of such contract.

I also understand that (1) Weaver's Sanitation has a drug and alcohol policy may provide for pre-employment testing as well as after employment ;(2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job related physical examination.

Signature of applicant: _____ **Date:** _____

Weaver's Sanitation is an equal opportunity employer. We assure you that your opportunity for employment with this company depends solely on your qualifications.

Company Substance Abuse Policy

Our policy is to employ a work force free from alcohol abuse or the use of illegal drugs. Any employee who violates this policy will be disciplined. This may include termination, even for a first offense.

We strive to provide a safe and healthy work environment, free from the use of illegal drugs*and abuse of alcohol and set forth the following rules:

Employees may not consume alcoholic beverages or take illegal drugs on our premises.

Employees may not report to work under the influence of drugs or alcohol.

If you are convicted under any federal or state criminal drug statute, you must notify an officer of the firm within five (5) days. This will be grounds for termination.

Legal drugs include prescribed and over-the-counter drugs which have been legally obtained and used for the purpose for which they are intended. Illegal drugs include any drug which is not legally obtainable, which may be obtainable but has not been legally obtained or which is being used in a manner or for a purpose other than as prescribed.

Weaver's Sanitation Service, Inc. Drug Testing Consent Form

I have applied for employment with Weaver's Sanitation in a position that requires me to operate an automobile or truck. As a condition for my application being considered, I

understand and agree to undergo substance screening. I understand that if my test results are positive, I shall not be considered further by Weaver's Sanitation for a car or truck driver position.

I hereby authorize any physician, laboratory, hospital or medical professional retained by Weaver's Sanitation for screening purposes to conduct such screening and to provide the results to Weaver's Sanitation, and I release Weaver's Sanitation and any person affiliated with Weaver's Sanitation and any such institution or person conducting the screening, from liability therefore.

Applicant's signature: _____

Applicant's name: _____

Date: _____