



Star Improvements of MI Inc
221 N. Water ST., Vassar, M 48768
989-823-7283
contact@starimprovementsofmi.com

Employment Application

NAME:		
ADDRESS:		
PHONE:	MOBILE:	EMAIL:

POSITION APPLIED FOR (PLEASE STATE FULL TIME, PART TIME, CASUAL):		
ARE YOU LEGALLY ENTITLED TO WORK IN THE USA? YES NO	SOCIAL SECURITY #:	
CURRENT USA CITIZEN YES NO	<small>SS# NOT REQUIRED TO BE CONSIDERED FOR EMPLOYMENT AT THIS TIME BUT WILL BE NEEDED FOR BACKGROUND CHECK</small>	
DRIVER'S LICENSE / ID NUMBER:		

EMPLOYMENT HISTORY
PRESENT OR MOST RECENT JOB:
PRESENT OR MOST RECENT EMPLOYER & LOCATION
DATE AVAILABLE TO START: ____/____/20____
LIST EXPERIENCES/JOBS YOU HAVE DONE (PAID AND UNPAID) THAT MAY BE RELEVANT TO THE POSITION APPLIED FOR:
WHY WOULD YOU LIKE TO WORK FOR US?
HAVE YOU PREVIOUSLY BEEN EMPLOYED BY STAR IMPROVEMENTS? YES NO

HEALTH
DO YOU HAVE ANY CURRENT CONDITION OR PAST MEDICAL HISTORY THAT MAY AFFECT YOU ABILITY FOR PHYSICAL WORK? YES NO (IF YES, SUPPLY DETAILS OF WHAT WORK YOU <u>CANNOT</u> PERFORM)

BACKGROUND		
HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENCE?	YES	NO
<p>QpVj #gdXj \ 1ogdx'e</p>		
DO YOU HAVE A VALID DRIVER'S LICENSE AND CLEAN DRIVING RECORD?	YES	NO
DO YOU AGREE TO US SUBMITTING A BACKGROUND CHECK?	YES	NO

HOURS OF WORK
OUR BUSINESS HOURS FLUCTUATE PER WEEK AND SEASON. DURING PEAK SEASON, WE DO OCCASIONALLY WORK WEEKENDS AND HAVE EXTENDED HOURS. REGULAR HOURS CAN CHANGE, AND YOU WILL NEED TO REMAIN FLEXIBLE TO ACCOMMODATE CHANGES TO YOUR WORK PATTERN. WORK IS ALSO DETERMINED BY INCLEMENT WEATHER, BUT WE DO WORK THROUGH SNOW AND RAIN AS CONDITIONS PERMIT. AS A CONDITION OF EMPLOYMENT, YOU MUST ACKNOWLEDGE YOU UNDERSTAND AND ACCEPT THESE HOURS AND THE VARIABILITY OF WORK BY INITIALING BELOW.
INITIALS:

REFERENCES	
NAME TWO PEOPLE (WHOSE CONSENT YOU HAVE OBTAINED) WHO KNOW YOU WELL AS AN EMPLOYEE THAT STAR IMPROVEMENTS MAY CONTACT. NOMINATE PEOPLE ABLE TO COMMENT ON YOUR ABILITY TO PERFORM THE DUTIES OF THE POSITION FOR WHICH YOU HAVE APPLIED.	
NAME:	NAME:
JOB TITLE:	JOB TITLE:
COMPANY:	COMPANY:
PHONE NUMBER:	PHONE NUMBER:

I CONSENT TO STAR IMPROVEMENTS OF MI INC SEEKING VERBAL OR WRITTEN INFORMATION ON A CONFIDENTIAL BASIS ABOUT ME FROM REPRESENTATIVES OF PREVIOUS EMPLOYERS AND/OR REFERENCES AND AUTHORIZE THE INFORMATION SOUGHT TO BE RELEASED BY THEM TO STAR IMPROVEMENTS OF MI INC FOR THE PURPOSES OF ASCERTAINING MY SUITABILITY FOR THE POSITION FOR WHICH I AM APPLYING. I UNDERSTAND THAT THE INFORMATION RECEIVED MAY NOT BE DISCLOSED TO ME. I DECLARE THAT THE ANSWERS TO THE QUESTIONS IN MY APPLICATION ARE TRUE AND CORRECT AND THAT ANY INCORRECT OR MISLEADING INFORMATION OR SUPPRESSION OF MATERIAL FACTS IN THIS FORM OR ANY OTHER DOCUMENT MAY LEAD TO DISQUALIFICATION, OR IF APPOINTED, TO TERMINATION OF EMPLOYMENT. I ACCEPT THAT SHOULD MY APPLICATION BE SUCCESSFUL, THE FOREGOING WILL BE PART OF MY EMPLOYMENT AGREEMENT.

SIGNED:

DATE: ____/____/20____

Thank you for your interest in being a part of the team! If you would like to mail or email this application in, please use the address below and we look forward to speaking with you!

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