



**References**

Name two people who have known you at least two years (do not include relatives, former employers, or personnel of this company)

1. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Business & Position: \_\_\_\_\_

2. Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Business & Position: \_\_\_\_\_

**Drug/Alcohol Testing Program**

DNC Cleaning has a drug/alcohol testing program. This program is used for Pre-Employment at random on job sites or on the job injuries involving a doctor's visit. Refusal to be tested on this program will be grounds for not hiring a prospective employee or for terminating a current employee.

**Applicant's Certification and Statement (Read carefully before signing)**

I hereby certify that the answers to the foregoing questions are true to the best of my knowledge and I understand that any misstatement of fact will, if I am employed, subject me to immediate dismissal. I also agree to follow policies and procedures of DNC Cleaning, Inc. I also understand that as a normal employment procedure, a routine inquiry may be made concerning my background and qualifications. I authorize such an investigation and understand that, upon my written request, information on the nature and scope of the inquiry, if one is made, will be provided to me. My present employer (may\_\_\_/may not\_\_\_) be contacted (Please check one). I also understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

**Information Verification**

After I have accepted the job offer, I authorize DNC Cleaning to request a Background Check, copy of my credit report from the Credit Bureau (Credit report for salary, exempt personnel only, in compliance with the FCRA) and a copy of my Motor Vehicle Driving Record, in the event that my position requires the use of a motor vehicle. I hereby agree to submit to drug test(s) that may be requested of me, whether prior to my employment, or, if employed by this company, at any time thereafter. I further understand that this is an application for employment and that no employment contract is being offered. I understand that if I am employed, such employment is at will and that the company can change wages, benefits, and conditions at any time. I understand that the company may terminate my employment at any time with or without reason if the job requires me to be insured (drivers, etc.), I will immediately inform DNC Cleaning at any time I become uninsurable. I have read and understand the above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

Because of my limited abilities in speaking and/or writing the English language, I have agreed to let someone other than myself fill out this application. I have signed below agreeing that the questions in this application were translated into a language that I understand and that I understand all the questions.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

Debido a que no hablo o escribo bien el idioma ingles, he estado de acuerdo de que alguien me llene esta solicitud o he leído la traducción completa. Firmo la presente en señal de que las preguntas a esta solicitud fueron traducidas al Español y que entiendo todas ellas.

\_\_\_\_\_  
Fecha

\_\_\_\_\_  
Firma del Solicitante