



APPLICATION OF EMPLOYMENT

EQUAL EMPLOYMENT OPPORTUNITY STATEMENT: Rhino Building Services, Inc. is committed to the principals of equal opportunity and is committed to make employment decisions based on merit. We are committed to complying with Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. Rhino Building Services, Inc. wishes to maintain a work environment that is free from harassment and discrimination due to race, religion, color, national origin, sex, sexual orientation, physical or mental disability, marital status, age, or any other status protected by Federal, State, or local laws.

DIRECTIONS: Please print clearly and fill out application completely.

PERSONAL INFORMATION

Name:		Today's Date:	
Address:		Home Telephone:	
City:		Cellular Phone:	
State:		Zip Code:	
Social Security #:		Do you have a Drivers Licence? Yes () No ()	
Drivers License #:	Issuing State:	Expiration Date:	

GENERAL INFORMATION

Position applying for:			
What date are you available to start?			
Which County Area:		Full Time () Part Time () Temporary ()	
What days are you available to work? Monday () Tuesday () Wednesday () Thursday () Friday () Saturday () Sunday ()			
What shift are you available to work? Daytime () Evening () Nighttime ()			
Have you ever applied with this company before? Yes () No ()			
Have you ever worked for Rhino? Yes () No ()			
If you have worked for Rhino; Please list the building you worked at?			
What was the reason for leaving Rhino?			
Do you know someone that works for Rhino? Yes () No ()			
Who? Name:			
Are you able to perform essential functions of the job for which you are applying, either with or without reasonable accomodation? Yes () No ()			
If No , please describe the functions that cannot be performed:			
Do you have reliable transportation for work? Yes () No ()			

BACKGROUND INFORMATION

Are you legally eligible to work in the United States? Yes () No ()			
Are you 18 years old or older? Yes () No ()			
Have you ever been convicted of a criminal offense? Yes () No ()			

LANGUAGES

Specify the languages that you:	Speak:	Write:	Read:
---------------------------------	--------	--------	-------

BACKGROUND INFORMATION (Continues)

EDUCATION

	High School	College	University
School name:			
Years completed:			
Degree:			

EMPLOYMENT

Are you presently employed? Yes () No ()

With what company? _____ Can we contact them? Yes () No ()

Supervisor's Name: _____

Supervisor Telephone: _____

EMPLOYMENT HISTORY

1) Company:	Start Date:	End Date:
Address:	Phone #:	Supervisor:
Title:	Salary:	
Job description:	Reason for leaving:	
2) Company:	Start Date:	End Date:
Address:	Phone #:	Supervisor:
Title:	Salary:	
Job description:	Reason for leaving:	
3) Company:	Start Date:	End Date:
Address:	Phone #:	Supervisor:
Title:	Salary:	
Job description:	Reason for leaving:	

REFERENCES

PROFESSIONAL REFERENCE		
Name:	Phone #:	Years known:
PERSONAL REFERENCE		
Name:	Phone #:	Years known:

PLEASE READ CAREFULLY

Complete and Accurate Information Statement: I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers give by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission for misstatement of material fact on this application or any other document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

At-Will Employment Statement: I understand and agree that if I am employed with Rhino Building Services, Inc. my employment will be "at-will"; which means that either Rhino Building Services, Inc. or I may terminate the employment relationship at any time, with or without cause or notice. Likewise, Rhino Building Services Inc. will respect my right to terminate my employment at any time, with or without notice and/or cause. I further understand that any prior representation contrary to the foregoing is binding on the company unless it is made in writing, and is assigned by myself and the company's designated representative.

I have read and understand the above policy statements

Signature: _____

Date: _____