

Application for Employment

Highland Light Steam/White Plains Linen is an Equal Opportunity and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

<u>PLEASE TYPE OR PRINT</u>. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid information will not be considered for any position.

Position Applying For:	Name (Last, First, Middle:						Other names under which you have attended school or been employed:			
Street Address:	City, State & Zip			State & Zip						
Social Security Nu	mber:	Home	Phone:		С	Cell Phone:	Other Phone:			
Have you ever been crime?	n convicted of	a	Yes	□No						
Are you eligible to States?	work in the U	nited	Yes	No						
Are you 18 years o	f age or older?		Yes No If NO, what is your			If NO, what is your cur	current age?			
Have you ever served in the U.S.Armed						If YES, what branch?				
Forces?						Dates of Duty: From:	Dates of Duty: From: To:			
Have you ever been Highland Light Ste			Yes	□No		If YES, dates of employ	ment & reason	for leaving:		
Are you related to any current Highland Light Steam Laundry?			Yes No If YES, their name & th			If YES, their name & the	neir relationship to you?			
If required for position, do you have a valid driver's license?			Yes No If YES, State of issuance date:			If YES, State of issuance date:	e, license #, and	d expiration		
How did you learn Job Bulletin (Po Referral by emp	osting) /Walk-i	•		<u> </u>		* * * * <u>=</u>	Ad in newspape Ad in magazine			
		;	Availab	ility S	<u>She</u>	<u>eet</u>				
Monday: From: 7	Co:			Tuesda From:	ay:	То:	Wednesday: From:	То:		
Thursday: From:	Го:			Friday: From:	:	То:	Saturday: From:	То:		
Sunday: From: T	o:									

HLSL is a commercial laundry that operates 24 hours a day, 7 days a week with shifts in various departments at different scheduled start times. This verifies the days and time of an employee's work availability. Our work week starts on Monday and ends on Sunday. Paychecks are issued every Friday for the previous Week **PLEASE NOTE YOUR SCHEDULE MIGHT CHANGE** (Please refer to your union manual)

Emergency Contact

Name:		Address:	City, State & Zip:		
Work phone:	Home Phone:	Cell Phone:	Other Phone:		
positions with the same organization, designation, designation with the same organization, designation or the complex considered falsification or the control of the contro	tail each position seption of information. INOT: complete this	arately. Attach add Please explain any information with th	ent or most recent employer. If you held multilitional sheets if necessary. Omission of prior gaps in employment. Include full-time military e notation "See Resume."		
Dates Employed (most recent position)			Title:		
From: To	Full time	Part-time			
	If part-time, # hrs.	/wk: 🗍			
Starting Salary:	Organization Name and Address:				
Final Salary:					
Supervisor's Name, Title and Phone #:	Other Reference N Phone #:	Jame, Title and	Contact my current references: At any time Only if I am a finalist candidate		
Primary duties:			Reason for Leaving:		
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Dates Employed (most recent position)			Title:		
From: To	☐Full time ☐	Part-time			
	If part-time, # hrs.	/wk·			
Starting Salary:	Organization Nam				
Einal Calamu	_				
Final Salary:					
Supervisor's Name, Title and Phone	Other Reference N	lame, Title and	Contact my current references:		
#:	Phone #:		☐ At any time ☐ Only if I am a finalist candidate		
			Only if I am a manst candidate		
Primary duties:			Reason for Leaving:		

EDUCATION

Name of School	Name of School City/State		If No, # of years left to graduate	If Yes, date of Graduation	Degree received	Major		
Grammar School:		Yes No	8					
High School:		Yes No						
College:		☐Yes ☐ No						
College:		☐Yes ☐ No						
Other School:		Yes No						
Other credentials/ licenses/ pro	fessional affiliatio	ns, etc., which are	relevant to the jo	bb(s) for which	you are apply	ing.		
References								
Name:		Occupation:		Phone:	Phone:			
Name:	Name:			Phone:	Phone:			
Name:	Name:			Phone:	Phone:			
SKILLS: Please list technic computer systems and soft proficiency (basic, intermed	ware packages o			_				
PLEASE READ CAREFULLY AND SI I certify that the information on this applic Complete the form, or misrepresentation or Employment if discovered at a later date. I Application and supporting materials. I au with this application for employment. I und does NOT constitute a contract for continue Serve at-will, and the employment relations If employed, I will be required to furnish or I understand that if employed on a tempora discontinuation at any time without prior no	ation and its supporting de omission of facts, repress authorize Highland Light chorize references and for- terstand that this document deguaranteed employment ship may be terminated at toof of eligibility to work ry basis, I would be paid to	ocuments is accurate and ents grounds for eliminati t Steam Laundry/WPL to mer employers, without let is NOT an offer of empt. I understand that non-uany time by either party in the United States, and	complete. I understant on from consideration investigate, without like it is investigate, without like it is investigate, and that an outling and or any or no reason, of to comply with comparent.	d and agree that failure for employment, or to ability, all statements esponse to any inquirieffer of employment, in ghland Light Steam Lengther than a reason proluny and departmental	ermination after contained in this es in connection f tendered, .aundry/WPL hibited by law. regulations.	e or		
Applicant Signature:			_ Date:					