



In order for you to be considered for employment, this application must be filled out in its ENTIRETY.
Resumes, though certainly welcomed, should not be submitted in lieu of information requested below

GENERAL

PLEASE PRINT

Date: _____ E-Mail _____
 Month Date Year

Name: _____ Social Security No: ____ / ____ / ____
 First Middle Last

Present Address: _____
 If less than 2 years at current address Street City State Zip

Previous Address: _____
 Street City State Zip

If Under 21: _____ Birth Date _____ Cell Phone: () _____
 If Under 21: _____ Home Phone: () _____

Are You Legally Able To Work In The United States? YES NO (Proof of identity and legal authority to work in the U.S. is a condition of employment)

Who referred you to SuperSuds? _____

Have you ever been convicted of a felony which has not been annulled or sealed by a court? YES NO

(Convictions will not necessarily exclude you from employment, but date and type of conviction may be considered for job placement.)

EMPLOYMENT DESIRED

Position	Date You Can Start	Desired Salary
Are You Currently Employed? <input type="checkbox"/> YES <input type="checkbox"/> NO	If So, May We Inquire Of Your Present Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Ever Applied To This Company Before? <input type="checkbox"/> YES <input type="checkbox"/> NO	Where?	When?

WORK SCHEDULE AVAILABILITY

Work Availability: We have shifts 8:00 AM- 3:00 PM. 3:00 PM-10 PM (Please list hours in each AM/PM box).

Shift	MON	TUES	WED	THUR	FRI	SAT	SUN
AM							
PM							

Are you willing to work a split shift? Yes _____ No _____ Are you willing to work late in a emergency? Yes _____ No _____

Are you willing to work holidays/ weekends? Yes _____ No _____ How many hours do you expect to work? _____

EDUCATION

Type of School	Name of School	Location of School	Courses Majored in	Last Year Completed
High				9 10 11 12
College				1 2 3 4

VOLUNTEER & MILITARY EXPERIENCE

Volunteer Experience:

Skills Acquired:

U.S. Military Experience: (If applicable)

Skills Acquired:

BUSINESS EXPERIENCE

(List most recent three employers)

Previous Employer	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address				Your Position	
City	State	Zip Code	Salary	Reason For Leaving	
Previous Employer	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address				Your Position	
City	State	Zip Code	Salary	Reason For Leaving	
Previous Employer	Area Code/Phone	From Mo. Year	To Mo. Year	Name of Immediate Supervisor	Title
Street Address				Your Position	
City	State	Zip Code	Salary	Reason For Leaving	

I AFFIRM THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE. ANY MISREPRESENTATION, FALSE STATEMENT, OR OMISSION OF FACTS CALLED FOR SHALL BE GROUNDS FOR REFUSAL OF EMPLOYMENT OR IF HIRED, DISMISSAL FROM EMPLOYMENT. I UNDERSTAND THAT ANY VIOLATION OF COMPANY RULES, POLICIES, STANDARDS, AND/OR PROCEDURES SHALL BE GROUNDS FOR DISMISSAL. I AGREE TO CONFORM TO THE RULES, POLICIES, STANDARDS, AND REGULATIONS OF MARDEED INC. AND SUPERSUDS. I UNDERSTAND THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME AT THE OPTION OF MARDEED INC, SUPERSUDS OR MYSELF, AND I UNDERSTAND THAT NO REPRESENTATIVE OF THE COMPANY HAS THE AUTHORITY TO MAKE MODIFICATIONS, EITHER VERBALLY OR IN WRITING TO THE CONTRARY.

IT IS THE POLICY OF MARDEED, INC. dba SUPERSUDS TO HIRE ONLY U.S. CITIZENS AND ALIENS WHO ARE LAWFULLY AUTHORIZED TO WORK IN THE UNITED STATES. ALL EMPLOYEES WILL BE ASKED TO VERIFY EMPLOYMENT ELIGIBILITY PRIOR TO BEGINNING WORK.

DATE _____

SIGNATURE OF APPLICANT _____

I UNDERSTAND THAT MY APPLICATION WILL REMAIN ACTIVE FOR 30 DAYS FROM THE DATE RECEIVED