Employment Application

Please complete the entire application.

 Employe 	er Inf	ormation
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Employer: LL's Handyman Service Address: 7647 Austin Dr.

City/State/ZIP: Chattanooga, Tennessee 37416

Telephone: 4235803713

It is the policy of LL's Handyman Service to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

2. Applicant Information	
Applicant Full Name:	
Home Address:	
City/State/ZIP:	
Number of years at this address:	
Daytime Phone:	Evening Phone:
Mobile Phone:	
Social Security Number:	
Driver's License (State/Number):	
3. Emergency Contact	
Who should be contacted if you are involved	ved in an emergency?
Contact Name:	• •
Relationship to you:	
Address:	
City/State/ZIP:	
Daytime Phone:	_ Evening Phone:
4. Job Position Applied For: Laborer	
5 What is the least amount you are ex	specting to be paid per day? \$
6. Are you at least 18 years old?	YesNo
7. How will you get to work?	

seeking. Enter the number of years of experience ability for each particular skill. (One represents ability.)		nds to your
		Ability
Skill	Years of Experience	or Rating
[] Handyman Experience		1 2 3 4 5
[] Installing Plank Flooring		12345
Plumbing Experience		12345
Name:		
Address:City/State/ZIP: Telephone:Relationship:		
City/State/ZIP:		
City/State/ZIP: Telephone: Relationship:		
City/State/ZIP: Telephone: Relationship: Name: Address: City/State/ZIP:		
City/State/ZIP: Telephone: Relationship: Name: Address:		

8. If you are offered employment, when would you be available to begin work?

Certification

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for the rejection of my application or, if employment commences, immediate termination.

I authorize LL's Handyman Service to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Supervisor, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of LL's Handyman Service, except in a specific written contract of employment signed on behalf of the organization by its Supervisor, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION, AND I UNDERSTAND AND AGREE TO ITS TERMS.

Applicant Signature	Date