



**CAREER HISTORY**

This information will not be the only basis for hiring decisions. You are not required to furnish any information that is prohibited by federal, state, or local law.

**Applicant Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
*Street City State Zip*

Position Applied for: \_\_\_\_\_ Earnings expected \$: \_\_\_\_\_

**Business Experience**

Please start with your present or most recent position.

**A. Firm:** \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
*Street City State Zip*

Kind of business: \_\_\_\_\_ Employed from: \_\_\_\_\_ To: \_\_\_\_\_  
 (Show months as well as years)

Base \$ \_\_\_\_\_  
 Bonus \$ \_\_\_\_\_  
 Other \$ \_\_\_\_\_

Title: \_\_\_\_\_ Initial compensation \$ \_\_\_\_\_  
 Final total compensation \$ \_\_\_\_\_

Supervisory Responsibility: \_\_\_\_\_

Name and Title of immediate supervisor: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ May We Contact?: \_\_\_\_\_

Email Address: \_\_\_\_\_

What (do)(did) you like most about your job?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What (do)(did) you least enjoy?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reasons for leaving or desiring to change:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**B. Firm:** \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ *Street* \_\_\_\_\_ *City* \_\_\_\_\_ *State.* \_\_\_\_\_ *Zip*

Kind of business: \_\_\_\_\_ Employed from: \_\_\_\_\_ To: \_\_\_\_\_  
(Show months as well as years)

Base \$ \_\_\_\_\_

Bonus \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Title: \_\_\_\_\_ Initial compensation \$ \_\_\_\_\_

Final total

compensation \$ \_\_\_\_\_

Supervisory  
Responsibility: \_\_\_\_\_

Name and Title of immediate supervisor: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ May We Contact?: \_\_\_\_\_

Email Address: \_\_\_\_\_

What (do)(did) you like most about your job?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What (do)(did) you least enjoy?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reasons for leaving or desiring to change:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Firm:** \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ *Street* \_\_\_\_\_ *City* \_\_\_\_\_ *State.* \_\_\_\_\_ *Zip*

Kind of business: \_\_\_\_\_ Employed from: \_\_\_\_\_ To: \_\_\_\_\_  
(Show months as well as years)

Base \$ \_\_\_\_\_

Bonus \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Title: \_\_\_\_\_ Initial compensation \$ \_\_\_\_\_

Final total

compensation \$ \_\_\_\_\_

Supervisory  
Responsibility: \_\_\_\_\_

Name and Title of immediate supervisor: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ May We Contact?: \_\_\_\_\_

Email Address: \_\_\_\_\_

What (do) (did) you like most about your job?

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What (do) (did) you least enjoy?

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Reasons for leaving or desiring to change:

**OTHER POSITIONS HELD:**

	a. Company b. City, State	a. Your Title b. Name of Supervisor	Date (mo. / yr.) a. Began b. Left	Compensation a. Initial B. Final	a. Type of work b. Reason for leaving
<b>D.</b>					
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____
<b>E.</b>					
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____
<b>F.</b>					
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____
<b>G.</b>					
a.	_____	_____	_____	_____	_____
b.	_____	_____	_____	_____	_____

What employers do you not wish to be contacted?

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**Experience: Additional Information**

Please answer the following questions in regards to your previous experience:

1. Have you managed employees before? If so, how many and in what roles? \_\_\_\_\_

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2. Have you managed Subcontractors before? If so, how many and what types of services did they provide?

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3. Do you have experience in dealing with supply vendors? If so, please describe that interaction.

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4. What languages do you speak? Fluently/Broken/Etc... \_\_\_\_\_

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5. Would you say you are best suited in (1) an administrative, paperwork driven role or (2) a hands on "get it done" role?

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6. Are you able and willing to work hours outside of M-F 8 am – 6pm? \_\_\_\_\_

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7. The position requires clearing a national criminal background check, 7 panel drug screen, and numerous safety quizzes. Are you comfortable doing these things in order to move forward? \_\_\_\_\_

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8. Please describe a recent problem you had to overcome and how you went about it. \_\_\_\_\_

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9. What would your customers say about you? \_\_\_\_\_

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10. What would your last two Managers say about you? \_\_\_\_\_

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**Education**

High School                    1            2            3            4  
College/Graduate School    1            2            3            4            5            6            7            8  
(Circle highest grade completed.)

**A. High School**

Name of High School \_\_\_\_\_

Location \_\_\_\_\_

Approximate number in graduating class \_\_\_\_\_ Rank from the top \_\_\_\_\_

Final grade point average \_\_\_\_\_ (A= \_\_\_\_\_)

Extracurricular activities \_\_\_\_\_

Offices, honors/awards \_\_\_\_\_

Part-time and summer work \_\_\_\_\_

**B. College/Graduate School**

Name and Location	Dates		Degree	Major	Grade point Average	Total Credit Hours	Extracurricular activities, honors and awards
	From	To					

What undergraduate courses did you like most? Why? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What undergraduate courses did you like least? Why? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How was your education financed? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Part-time and summer work \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other courses, seminars, or studies \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Activities**

Membership in professional or job-relevant organizations. (You may exclude groups that indicate race, Color, religion, national origin, disability, or other protected status.)

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Publications, patents, inventions, professional licenses, or additional special honors or awards.

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What qualifications, abilities, and strong points will help you succeed in this job?

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What are your weaker points and areas for improvement?

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**Professional & Personal References**

**#1. Name:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Company:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_  
**Office / Cell phone:** \_\_\_\_\_  
**Email address:** \_\_\_\_\_

**#2. Name:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Company:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_  
**Office / Cell phone:** \_\_\_\_\_  
**Email address:** \_\_\_\_\_

**#3. Name:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Company:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_  
**Office / Cell phone:** \_\_\_\_\_  
**Email address:** \_\_\_\_\_

**#4. Name:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Company:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_  
**Office / Cell phone:** \_\_\_\_\_  
**Email address:** \_\_\_\_\_

**#5. Name:** \_\_\_\_\_  
**Relationship:** \_\_\_\_\_  
**Company:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_  
**Office / Cell phone:** \_\_\_\_\_  
**Email address:** \_\_\_\_\_

#6. Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Office / Cell phone: \_\_\_\_\_  
Email address: \_\_\_\_\_

**Other**

Do you have the legal right to work for any employer in the United States?

Yes \_\_\_\_\_ No \_\_\_\_\_

Do you agree to allow Atlas Facilities Maintenance, Inc. to conduct a criminal background check?

Yes \_\_\_\_\_ No \_\_\_\_\_

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I certify that answers given in this Personal Career History are true, accurate, and complete to the best of my knowledge. I authorize investigation into all statements I have made on this form as may be necessary for reaching an employment decision.

In the event I am employed, I understand that any false or misleading information I knowingly provided in my Personal Career History or interview(s) may result in discharge and/or legal action. I understand also that if employed, I am required to abide by all rules and regulations of the employer and any special agreements reached between the employer and me.

Signature \_\_\_\_\_

Date \_\_\_\_\_