DATE _____

APPLICATION FOR EMPLOYMENT

GMRR Services, LLC d/b/a Hydromax Plumbing d/b/a RotoRooter

GMRR Services, LLC is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

PERSONAL INFORMATION

Applicant's Name (Last, First and Middle Initial)			Are You Over 18 Years	
			of Age 🗋 Yes 🗋 No	
Present Address	City and State and Zip		Phone No:	
Position Applying For		FT PT Temporary		
Date Available	Desired Pay Range	How Did You Hear About Us / Referred by?		
Email Address				
Are you legally authorized to work in the United States? 🗖 Yes 📮 No				
Will you be able to provide proof of your identity and employment eligibility if you are bired $2 \square$ Vec. \square No.				
Will you be able to provide proof of your identity and employment eligibility if you are hired? 🗖 Yes 📮 No				

EDUCATION

High School / City & State	# of Yrs Completed	Diploma Yes No GED	Major / Subject Studied
College/Vocational / City & State	# of Yrs Completed	Graduated Yes No	Degree Earned
College/Vocational / City & State	# of Yrs Completed	Graduated Yes No	Degree Earned
Other Training or Degrees / City & State	# of Yrs Completed	Course(s)	Degree or Certificate Earned

PROFESSIONAL LICENSE OR MEMBERSHIP

Type of License & State (if applicable)	Issuing Organization / City & State	License #	License Exp Date

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

APPLICATION FOR EMPLOYMENT

SKILLS (check all that apply) I MS Office Excel I MS Office Word I MS Office Outlook (Email Application)

Customer Service

□ Computers (General Use) □ Email Application

Good Verbal/Written Communication General Mobile Device Skills (Android / IOS Application)

Other _____

Have you viewed the job description/Minimum Requirements of the Job: 🗆 Yes 🗔 No

Are you able to perform the essential functions of this position with or without reasonable accommodations? \Box Yes \Box No If you require a reasonable accommodation, please specify what accommodation.

EMPLOYMENT

Have you ever been employed with any Hydromax Plumbing? Yes No If yes, please indicate what position and dates of employment

Position:

Dates: From(mm/yy) _____ To (mm/yy) _____

List below last four employers, beginning with last, including Military experience

Date: Month & Year	Name & Address of Employer	Position	Reason for Leaving	
Start: End:				
Phone Number	Supervisor	Duties / Respon	s / Responsibilities	
Date: Month & Year	Name & Address of Employer	Position	Reason for Leaving	
Start: End:				
Phone Number	Supervisor	Duties / Responsibilities		
Date: Month & Year	Name & Address of Employer	Position	Reason for Leaving	
Start: End:				
Phone Number	Supervisor	Duties / Responsibilities		
Date: Month & Year	Name & Address of Employer	Position	Reason for Leaving	
Start: End:				
Phone Number	Supervisor	Duties / Respor	nsibilities	

Have you ever been fired or asked to resign from a job? \Box Yes \Box No

APPLICATION FOR EMPLOYMENT

If yes, please explain:

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and I authorize GMRR Services, LLC to verify their accuracy and to obtain reference information on my work performance. I hereby release GMRR Services, LLC from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant	Date:	
Signature of Applicant	 Dutti	



United Companies will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph. If you believe that your

APPLICATION FOR EMPLOYMENT

employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).