

APARTMENT MANAGER/MAINTENANCE APPLICATION



Please fill out this application clearly and provide copy of your Driver License or ID with this application.

First Middle Last Name	Birth Date	Social Sec No.	State & Driver Lic No.	Date Exp.
ID Address:			Date ID Issued	
Web Site Address:				
E-mail Address	Home Phone	Mobile Phone	Text Phone	Fax No.

Employment History - Business Card/Resume Helpful / Explain periods of unemployment

Employment	Current Employment	Previous Employment / 2nd Job
Employed by		
Business Address		
Employer Phone		
Job Title		
Responsibilities		
Type of Business		
Supervisor		
Dates of Employment	From to	From to
Starting Salary	\$ Check/Cash/Direct Dep	\$ Check/Cash/Direct Dep
Ending Salary	\$ Check/Cash/Direct Dep	\$ Check/Cash/Direct Dep
Days & Hours		
Reason for leaving		

Current and Prior Addresses

Residence	Current Address House/Apt No.	Prior Address
Street Address		
City, State & Zip		
Dates of Stay	From to	From to
Monthly Rent	\$ Check/Cash	\$ Check/Cash
Owner/Manager		
Phone No.		
Owner's Address		

Banking references

Bank's Name	Account in Name of	Account No.	Date Opened

Credit Cards references

Bank's Name	High Credit Limit	Account Number	Balance	Mon Payment

Personal References - Nearest Relatives & Close Friends

First Name Last Name	Address, City & Zip	Phone No.	Profession	Relationship	Years

Professional references, associates worked with

First Name Last Name	Company Address, City & Zip	Phone No.	Job Title	Relationship	Years

Automobile/Truck/Van (Provide auto registration and insurance)

Type/Make/Model	Year	License No.	Registered Owner

Date Available to work: _____ Hours per week able to work _____

Desired Salary per month: \$ _____ Position Applied for: _____

Are you citizen of United States? Y N if no, are you authorized to work and would you be able to provide the necessary documents of proof of the legal right to work upon hire? Y N

Have you ever worked for this company? Y N if yes, when _____

May we contact your previous supervisor or your reference? Y N

Have you ever been convicted of a felony? Y N If YES, what was (were) the offense(s)? _____

Date(s) and place(s) of conviction _____

Applicant declares that all the information given on this application is true and correct and hereby authorizes verification of all references and facts. Submitted application and supporting documents are not returnable and becomes property of Management Company. Applicant hereby waives any claims and releases from liability any person providing or obtaining said verification or additional information.

Applicant _____

Dated: _____