



**Application for Employment
Owner Operators**

(December, 2009)

Office Use Only

Availability Date: _____ Location: _____
Supervisor: _____

Personal Information

Surname: _____ Given Name: _____
Address: _____ City: _____ Postal Code _____
Home Telephone: _____ Work Telephone: _____

Please Read Carefully

Do you have any janitorial experience? Yes No
Are you Bondable? Yes No
Is your Company Registered? Yes No
What is the name of your Company? _____
Have you worked for Scandinavian Building Services before? Yes No
What type of machinery(janitorial) are you able to operate?

Where have you cleaned? _____
Do you know how to strip and wax floors? Yes No
Do you have a strip and wax crew? Yes No
How many in your crew? _____
Are you able to work: Full time Part time Daytime Evenings
7 days/week 5 days/week

Please provide us with the following forms:

- Business License
- Insurance Company
- GST Number
- WCB Number

The foregoing statements are correct. I understand that any misrepresentation may disqualify me from employment or be cause for my dismissal. If hired, I agree to abide by all rules and regulations of Scandinavian Building Services Ltd., including serving an initial three(3) month probation period.

Applicant's Signature: _____
Date: _____