



APPLICATION FOR CONTRACT LABOR

Date of Application: _____ Phone Number(s): _____

Applicant Full Name : _____ DOB: _____
MM / DD / YYYY

Are you a U.S. Citizen? Yes No

If you answered "No" above, are you eligible to work in the United States with an active Visa? Yes No

Current Physical/Home Address (Numbered Street / City / State / Full Zip Code):

Email Address: _____ Preferred Method of Contact: Phone Email

Position Applicability/History: Do you have any prior experience with other moving, packing/unpacking, organization, decluttering, estate preparedness, junk removal, pest control, rodent and/or hoard remediation companies or individuals? Yes No

Place a check mark on any days you're available to work in the section below. Please write in the range of time for your availability on the line next to each day (EX: 8:30am – 6:00pm / or 10:00am – 5:15pm).

NOTE – FRPP Employees/contractors are not required to work Sundays, however if a job comes in that we may be able to accommodate, we will reach out to employees and give an opportunity to accept the job at will. It is NEVER MANDATORY for any employees to work on a Sunday and declining a last-minute job request will not affect future employment opportunities nor will it have a negative impact on your status of employment with FRPP. Additionally, employees that work Sunday jobs will be eligible for a 25% hourly wage increase for hours worked that day (EX: If your normal hourly wage is \$25, your hourly wage would be increased to \$31.25 for actual hours worked on a Sunday job).

Desired Starting Rate of Pay (Hourly): _____ Part Time Full Time

Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____

Do you currently work in, or have prior experience working for a U.S. Military Branch, Law Enforcement, Fire Department, Emergency Response, Crisis Intervention/Advocacy or Criminal Justice Agency? Yes No

[If Yes] Please briefly explain/describe any past and current affiliations, licenses, roles or accreditations:

[If No] Does an immediate or extended family member of yours represent or have a role in any of the categories above, or any others not listed? Please briefly explain your relationship to them, and their role(s):

EDUCATION & EMPLOYMENT HISTORY

Are you a High School Graduate, or did you earn a GED? Yes No

[If Yes] Please list the school you graduated from & year of graduation OR write the year you obtained a GED:

[If No] Please describe the reason you did not graduate High School or earn a GED:

***Please Note – This is NOT a disqualification for employment opportunities with FRPP...We are seeking honesty and all of the questions on this application are simply tools for our owners/management to get to know you.*

Did you attend any colleges, trade schools, continuing education courses or any other advanced field-related training relating to prior jobs? Yes No

[If Yes] Please list the institution(s) you attended, dates attended, and the highest level of degree, certificate, or recognition you obtained.

List your employment history for the past five (5) years, starting with the most recent below. If additional space is needed, please use the "Additional Details" section at the end of this application.

1. Company Name: _____ May we contact them? Yes No

If you have indicated that we may NOT contact this employer, please briefly explain why: _____

Dates of Employment: From _____ To _____ Currently Employed Here?

Company Address: _____

Phone Number: _____ Manager/Supervisor Name: _____

Primary roles & responsibilities: _____

Did you manage or supervise other employees at any time during your employment here? Yes No

Check appropriate box below & briefly describe the reason your employment ended:

Resigned/Quit

Terminated/Fired

Retired

Contract Ended

Seasonal Employment

Employment History, Cont.

2. Company Name: _____ May we contact them? Yes No

If you have indicated that we may NOT contact this employer, please briefly explain why: _____

Dates of Employment: From _____ To _____ Currently Employed Here?

Company Address: _____

Phone Number: _____ Manager/Supervisor Name: _____

Primary roles & responsibilities: _____

Did you manage or supervise other employees at any time during your employment here? Yes No

Check appropriate box below & briefly describe the reason your employment ended:

Resigned/Quit Terminated/Fired Retired Contract Ended Seasonal Employment

3. Company Name: _____ May we contact them? Yes No

If you have indicated that we may NOT contact this employer, please briefly explain why: _____

Dates of Employment: From _____ To _____ Currently Employed Here?

Company Address: _____

Phone Number: _____ Manager/Supervisor Name: _____

Primary roles & responsibilities: _____

Did you manage or supervise other employees at any time during your employment here? Yes No

Check appropriate box below & briefly describe the reason your employment ended:

Resigned/Quit Terminated/Fired Retired Contract Ended Seasonal Employment

Employment History, Cont.

4. Company Name: _____ May we contact them? Yes No

If you have indicated that we may NOT contact this employer, please briefly explain why: _____

Dates of Employment: From _____ To _____ Currently Employed Here?

Company Address: _____

Phone Number: _____ Manager/Supervisor Name: _____

Primary roles & responsibilities: _____

Did you manage or supervise other employees at any time during your employment here? Yes No

Check appropriate box below & briefly describe the reason your employment ended:

Resigned/Quit Terminated/Fired Retired Contract Ended Seasonal Employment

5. Company Name: _____ May we contact them? Yes No

If you have indicated that we may NOT contact this employer, please briefly explain why: _____

Dates of Employment: From _____ To _____ Currently Employed Here?

Company Address: _____

Phone Number: _____ Manager/Supervisor Name: _____

Primary roles & responsibilities: _____

Did you manage or supervise other employees at any time during your employment here? Yes No

Check appropriate box below & briefly describe the reason your employment ended:

Resigned/Quit Terminated/Fired Retired Contract Ended Seasonal Employment

BACKGROUND INFORMATION

Have you plead no contest to or been convicted of a felony (of any degree) in the past 10 years? Yes No

[If Yes] Please list the state in which you were convicted, date of offense, date of conviction, disposition/final verdict and sentencing detail(s) – this includes actual time served and any related probationary terms.

If additional space is needed, please use the “Additional Details” section at the end of this application.

Current Full Legal Name: _____ DOB: _____

Phone Number: _____ Place of Birth (City/State): _____

Driver License OR State Identification Card Number: _____ Issuing State: _____

If you do **not** hold a current or valid state issued driver license or ID, please list another form of identification:

Please list ALL other, alias, nicknames or additional names (birth, marriage(s)/maiden, divorce etc.) used at any time in the **past 15 years**: _____

Social Security Number: _____ - _____ - _____ IRS/TIN Number: _____ - _____ - _____

List your address history for the past ten (7) years (prior to your current address) below.

1. PREVIOUS Address (Full Street / City / State / Full Zip Code): Rent Own Other

No. Years _____ and Months _____ you resided here. -OR- Dates (to/from): _____

Landlord Name & Phone Number (If Applicable): _____

List anyone else that lived here with you – Name & Phone Number: _____

2. PREVIOUS Physical/Home Address (Numbered Street / City / State / Full Zip Code):

Number of Years _____ and Months _____ you resided here. Rent Own Other

Landlord Name & Phone Number (If Applicable): _____

List anyone else that lived here with you – Name & Phone Number: _____

Address History, Cont.

3. PREVIOUS Address (Full Street / City / State / Full Zip Code): Rent Own Other

No. Years _____ and Months _____ you resided here. -OR- Dates (to/from): _____

Landlord Name & Phone Number (If Applicable): _____

List anyone else that lived here with you – Name & Phone Number: _____

4. PREVIOUS Physical/Home Address (Numbered Street / City / State / Full Zip Code):

Number of Years _____ and Months _____ you resided here. Rent Own Other

Landlord Name & Phone Number (If Applicable): _____

List anyone else that lived here with you – Name & Phone Number: _____

If you have additional addresses to add, please use the “Additional Details” section at the end of this application.

The following documents are required for every new-hire and must be submitted **PRIOR** to working. Please do not submit these documents with your application, however be prepared to provide **copies** upon request:

- **High School Diploma, GED or Equivalent**
- **Social Security Card**
- **Birth Certificate**
- **One (1) of the following additional personal identifiers:**
 - **Both the FRONT and BACK sides of your Driver License**
 - **Both inner pages of your U.S. Passport (Not expired within the past 18 months)**
 - **Both the FRONT and BACK sides of your State Issued ID**
- **TX Automobile Liability Insurance card for any vehicle to be driven to or parked on the property of clients for the purpose of conducting work for FRPP**
- **Completed IRS W9-Form (If applicable)**
- **All certifications relevant to this job or line of work and/or safety compliance: CPR/1st Aid/Hazmat/Bloodborne Pathogens/OSHA/Handling Chemicals & Proper Disposal/Emergency Preparedness & Heat Safety etc.**



REFERENCES

Please provide at least (1) personal and two (2) professional/community references below:

1. Name: _____ How long have you known this person? _____

What type of reference will this person provide? Personal Professional

Describe your relationship with this person: _____

Phone Number: _____ Email Address: _____

2. Name: _____ How long have you known this person? _____

What type of reference will this person provide? Personal Professional

Describe your relationship with this person: _____

Phone Number: _____ Email Address: _____

3. Name: _____ How long have you known this person? _____

What type of reference will this person provide? Personal Professional

Describe your relationship with this person: _____

Phone Number: _____ Email Address: _____

4. Name: _____ How long have you known this person? _____

What type of reference will this person provide? Personal Professional

Describe your relationship with this person: _____

Phone Number: _____ Email Address: _____

5. Name: _____ How long have you known this person? _____

What type of reference will this person provide? Personal Professional

Describe your relationship with this person: _____

Phone Number: _____ Email Address: _____

Community Involvement

Please describe any organizations you **currently** volunteer for in Texas, or virtually throughout the US; **AND** those for which you have previously volunteered for or held significant roles/positions within the past 5 years. Please briefly describe your frequency/level(s) of involvement with each organization, what led you to serve and the impact you believe your involvement has or had.

Current:

Previous:

AUTHORIZATION FOR CRIMINAL HISTORY / BACKGROUND CHECK

I,(print name) _____ hereby authorize **FIRST RESPONSE PACKING PROS AND THE DECLUTTER DIVAS/operating from the state of TEXAS** and their affiliates, agents and/or any other individuals authorized to represent the company to conduct a review of my background, criminal history (if applicable) and to obtain an investigative consumer report and/or credit report and any additional information necessary for the purpose of employment screening.

I understand and agree that the information obtained may include, but is not limited to credit and criminal history, past and present employment and income, bank accounts, credit accounts, credit reports, residential/rental history, references, vehicle and driver records, criminal records, civil proceedings/judgement records and any other relevant information. I further authorize previous or current employers, landlords, financial institutions/banks/creditors or other companies, public agencies, or individuals to release any information, records or data they may have pertaining to me. Any information received will be used only for the purposes stated herein and will be maintained in a confidential manner. Pursuant to the Fair Credit Reporting Act (FCRA), if any adverse action is taken based up on information in any consumer report(s) obtained, a copy of the report and summary of the consumer's rights will be provided to me.

_____ A copy, electronic copy, PDF conversion, image or facsimile of this authorization is as valid as the original document.
Initials

Applicant Signature: _____ Date: _____

ADDITIONAL DETAILS

Use this section to provide any additional details or explanations related to other sections of the application – Please indicate which section of the application each detail pertains to.

Applicant Signature: _____ Date: _____

**FIRST RESPONSE PACKING PROS AND THE DECLUTTER DIVAS IS AN EQUAL
OPPORTUNITY EMPLOYER**

Non-Discrimination Policy

The law forbids discrimination in every aspect of employment and no organization, employer, entity or individual is exempt from EEOC policies regarding applicants, hiring and employment.

The laws enforced by EEOC prohibit an employer or other covered entity from using neutral employment policies and practices that have a disproportionately negative effect on applicants or employees of a particular race, color, religion, sex (including gender identity, sexual orientation, and pregnancy), or national origin, or on an individual with a disability or class of individuals with disabilities, if the policies or practices at issue are not job-related and necessary to the operation of the business. The laws enforced by EEOC also prohibit an employer from using neutral employment policies and practices that have a disproportionately negative impact on applicants or employees age 40 or older, if the policies or practices at issue are not based on a reasonable factor other than age.

First Response Packing Pros and The Declutter Divas does not recruit new employees in a way that discriminates against them because of their race, color, religion, sex (including gender identity, sexual orientation, and pregnancy), national origin, age (40 or older), disability or genetic information. Further, First Response Pack and Purge will not base hiring decisions on stereotypes and assumptions about a person's race, color, religion, sex (including gender identity, sexual orientation, and pregnancy), national origin, age (40 or older), disability or genetic information.

If the position you are applying for with First Response Packing Pros and The Declutter Divas requires you (the applicant) to take a test, the test will only be given because it is necessary and related to the job. Applicants will be notified in advance of any interview or meeting conducted for the purpose of considering a person for hire if a test is required for the position they have applied.

Job applicants are NOT required to disclose whether or not they currently have a disability or have had one in the past. An applicant may choose to offer this information at will and First Response Pack and Purge will not discriminate, ask for details or related information regarding a disclosed disability, or discourage the applicant from applying. If a job applicant with a disability needs an accommodation (such as a sign language interpreter, ramp access, or any other accommodation) to apply for a job, First Response Pack and Purge will provide the accommodation, so long as the accommodation does not cause us significant difficulty or expense.

**I HAVE READ AND UNDERSTAND THE ABOVE NON-DISCRIMINATION POLICY AS WRITTEN AND SET FORTH BY
FIRST RESPONSE PACKING PROS AND THE DECLUTTER DIVAS, LLC.**

Applicant Printed Name

Applicant Signature

Date