

MEMBER'S BUILDING MAINTENANCE ("Company") APPLICATION FOR EMPLOYMENT

Date of Application: ____ / ____ / ____

GENERAL INFORMATION

Full Name (Last, First): _____ Social Security No.: ____ - ____ - ____

Street Address _____ Primary Phone No: (____) ____ - ____

City _____ State ____ Zip _____ Alternate Phone No: (____) ____ - ____

Mailing Address (if different from the above address): _____

Are you age 18 or older? Yes ☐ No ☐ (Type in X or leave blank. Company must verify that applicant is of legal minimum age to work if "No")

Have you ever been convicted of or plead guilty to a felony offense? Yes ☐ No ☐ (Type in X or leave blank.)

If yes, please briefly describe the circumstances of your conviction, indicating the date, nature and place of the offense and disposition of the case (A criminal conviction will not necessarily bar you from employment. The Company will need to review the relevant circumstances).

***** Emergency Contact and Notification *****

Name (Last, First): _____ Primary Phone No: (____) ____ - ____

Address: _____

EMPLOYMENT DESIRED AND AVAILABILITY

Position(s) applying for: _____ Salary/Wage desired: _____ per _____ (Hour, Week, Month, Year)

Have you ever been employed with us before? Yes ☐ No ☐ (If yes, give exact or approximate date.) Date: ____ / ____ / ____

Date available to work: ____ / ____ / ____ Shift: Day ☐ Evening ☐ Night ☐ Do you have transportation? Yes ☐ No ☐

Days you are available to work: Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday ☐

Are you legally authorized to work in the U.S.A.? Yes ☐ No ☐ (Proof of Such Lawful Work/immigration Status Will Be Required Prior To Hire)

What are your reasons or goals for seeking the above position(s)? _____

EDUCATION / SKILLS

	Name and Location	Years Attended	Degree/Graduated?	Major / Subject Studied
High School				
College / University				
Trade, Business, etc.				
Other				

Describe any experiences, skills or qualifications which would be of special benefit in the job for which you are applying.

EMPLOYMENT RECORDAre you currently employed? Yes ☐ No ☐Have you ever served in the U.S. Armed Forces? Yes ☐ No ☐**Employer Name 1** _____ From: ____/____/____ To: ____/____/____ Current/Most Recent? Yes ☐ No ☐

Street Address _____ Phone No: (____) ____-____ Weekly Wages: \$ _____

City _____ State ____ Zip _____ Supervisor _____ Phone No: (____) ____-____

Position / Duties _____ Can we contact your supervisor? Yes ☐ No ☐

Reason for Leaving _____ (use back of this page if needing more space)

Employer Name 2 _____ From: ____/____/____ To: ____/____/____ Current/Most Recent? Yes ☐ No ☐

Street Address _____ Phone No: (____) ____-____ Weekly Wages: \$ _____

City _____ State ____ Zip _____ Supervisor _____ Phone No: (____) ____-____

Position / Duties _____ Can we contact your supervisor? Yes ☐ No ☐

Reason for Leaving _____ (use back of this page if needing more space)

Employer Name 3 _____ From: ____/____/____ To: ____/____/____ Current/Most Recent? Yes ☐ No ☐

Street Address _____ Phone No: (____) ____-____ Weekly Wages: \$ _____

City _____ State ____ Zip _____ Supervisor _____ Phone No: (____) ____-____

Position / Duties _____ Can we contact your supervisor? Yes ☐ No ☐

Reason for Leaving _____ (use back of this page if needing more space)

Please explain all employment gap or unemployment period: _____

Have you ever been terminated from employment? Yes ☐ No ☐ Please explain if yes: _____**YOUR EXPERIENCE**

Use this space to give us other information about your personal quality, work style, interpersonal/communication skills or other work experience that will help us to better understand your qualification and consider you for the position: _____

Certification and Signature

I, the applicant, certify that all information given on this application is true, correct and complete to the best of my knowledge. I also certify that I have accurately accounted for all of my work history and experience for the past 10 years, as well as any relevant training on this application, and that I have not knowingly withheld any fact or circumstance which would, if disclosed, affect my application unfavorably.

The Company is hereby authorized to make any investigation or inquiry of my past employment (including current employment if I indicated above this would not pose any difficulty), education background, credit or criminal history through any investigative agencies or bureaus of its choice. I release all relevant parties from all liability for any damages through its agents, to communicate with my past or prospective employers regarding my employment and work history.

I understand that an offer of employment and continued employment with the Company is contingent upon my furnishing satisfactory proof of my authorization to work in the United States.

If employed by the Company, I agree to abide by its work policies, rules and regulations. I understand that discovery or misrepresentations or omission of facts herein will make me ineligible for employment or will be cause for immediate dismissal. I agree to furnish additional information as may be required to complete my employment file. I understand that operating conditions may require me to temporarily work shifts other than the one for which I am applying and I agree to such scheduling change as directed by my supervisor.

I understand that any offer of employment made to me is subject to completion of the Medical Examination and Mobility Evaluation and that my continued employment may be conditioned upon my continued ability to perform all essential job functions, with or without reasonable accommodation, and successful drug/alcohol screening. I also agree that all of my personal information and evaluation can be supplied to the authorized agent of this Company, upon their request.

ARBITRATION AGREEMENT

The Company and applicant ("Applicant") mutually agree, if elected in accordance with this Arbitration Agreement, to the resolution, through final and binding arbitration, of any and all legal or equitable disputes or claims between them, including but not limited to those claims or disputes relating to or arising from or out of the employment relationship or hiring process between the Company and Applicant, including, without limitation, claims and disputes pertaining to Applicant's hiring, failure to hire and separation from employment, employee benefit plans, discrimination, retaliation, wrongful termination, compensation, statutory claims, contracts and torts of any kind. The Company and Applicant agree that, in the event either party, or their representatives, successors or assigns, brings an action in a court of competent jurisdiction relating to or arising out of the employment relationship, including the application process, between such parties, either Applicant, the Company, or both, may, at any time, within 90 days of the service of the lawsuit papers upon the other party, require all or part of the dispute to be arbitrated. If the election to arbitrate is exercised, the party making the arbitration election shall give written notice to the other party and to the court where the action is pending. The arbitration shall be in accordance with the then-current Employment Dispute Resolution Rules of the American Arbitration Association ("AAA"). The arbitrator shall issue a written decision and award, if any, stating the reasons therefore. The decision and award shall be final and binding on the Applicant, the Company, their heirs, executors, administrators, successors and assigns. Provided, however, the parties agree that the arbitrator shall not make any award for and the parties waive any rights to an award of any punitive or exemplary damages. The arbitration filing fee and the costs and expenses of the arbitrator and hearing shall be borne evenly by the parties. However, each party shall bear their own legal costs related to retention of legal counsel. It is the intention of the parties that this Agreement shall be enforceable under the Texas General Arbitration Act, the Federal Arbitration Act and at common law. The arbitration hearing and all related proceedings shall be conducted in Dallas County, Texas, unless otherwise agreed. Applicant understands that any reference in this Arbitration Agreement to the Company will be a reference to: Member's Building Maintenance, LLC., the Company referenced herein; Applicant's employer; the Company's managing agents, owners, employees and partners, and to all parent and subsidiary entities and other entities and individuals affiliated with the Company, including all employee benefit plans, their sponsors, administrators, affiliates, and all successors, assigns employees, owners and agents of any such entities.

I understand that this is an application for at-will employment and that no employment contract, either express or implied, is being offered. I also understand that if employed, such employment is for an indefinite period and can be terminated at will by either party, with or without notice, at any time, for any or no reason, and is subject to change in wages, conditions, benefits and operating policies at the sole discretion of the company.

Applicant's Signature

Applicant's Printed Name

Date

RELEASE OF EMPLOYMENT INFORMATION/RECORDS BY APPLICANT

I, _____ hereby authorize Member's Building Maintenance to investigate all facts contained in my application for employment with said company, and authorize the release of any and all information by my present (if indicated on application that this would not pose any difficulty) and past employers, wherever located, which may be required for a reference check. I further authorize all of my previous employers and current employer to give any and all information concerning my employment and any other pertinent information which said employers may have, personal or otherwise, and I release all parties from all liabilities for any damages which may result from the furnishing of said information.

A copy of this release shall be as valid as the original.

Applicant's Signature

Applicant's Printed Name

Date

Witness Signature

Printed Name of Witness

Date

**MEMBER'S BUILDING MAINTENANCE, LLC.
COMPANY POLICIES**

Work Rules:

1. Work only in area assigned. Any employee found on a floor or in an office other than assigned work areas are subject to discipline, up to and including immediate termination; NO EXCEPTIONS.
2. Employees will follow all safety rules and follow common safety practices.
3. Employees will be polite to all occupants of the building.
4. Employees will maintain proper hygiene and wear proper uniforms and clothing.
5. Employees will not report to work when intoxicated or otherwise under the influence of any substance that renders the employee unable to perform his or her job in a safe manner.
6. Employees will not use alcoholic beverages or non-prescribed drugs while working and will use prescribed drugs in accordance with their instructions as long as those instructions allow the employee to work safely.
7. Employees are paid every other week and should not expect loans or advance prior to payday.
8. Employees will not smoke while working but may smoke in designated smoking areas during break time or lunch period.
9. Employees will not loiter in tenant offices or building.
10. Employees will not use lewd, foul or abusive language while in the building.
11. Employees will not harass, threaten, fight, or display acts of violence or disorderly conduct while working or in their places of work.
12. Employees will not use or tamper with office machines or use fitness center equipment.
13. Employees may not bring in large bags, other than lunch containers, into tenant offices or buildings.
14. Employees will not eat during working hours.
15. Employees will not use tenant phones. Go to custodial office to use phone for Emergency or personal calls.
16. Employees must follow the issued cellular phone policy, which restricts personal calls during working hours.
17. Employees may not use videotape, photograph, or tape recording instruments without Company permission.
18. Employees finding anything of value (money, wallets, jewelry, cell phones, etc.) not in their proper place will report this to their supervisor immediately.
19. Employees will exercise reasonable caution and care in the use of equipment, tools, and supplies, so must not to damage offices, furnishings, the equipment, or cause personal harm to themselves or others.
20. Employees may not leave the building or work site during regular working hours without properly notifying a Supervisor or Manager.
21. An employee who expects to be late or absent from work must notify his/her supervisor at least two hours before they are scheduled to come in, so a replacement can be found. The company also maintains a telephone service from 6 p.m. to 8 a.m. at (972) 241-8131. When calling in, be sure to give the operator your name, your supervisor's name and a brief message or description of the problem.
22. When an employee does not call in or report for work at the assigned time, after 72 hours, the employee has voluntarily resigned.
23. Excessive absences and/or tardiness will result in dismissal. Two absences per month are considered excessive. In case of illness, we may require a doctor's explanation.
24. Empty cans are not to be salvaged or stored in janitor's closets.
25. Every injury on the job regardless of how minor must be reported to your supervisor immediately. For serious accidents, call (972) 241-8131 or your supervisor immediately.
26. Employees will not allow anyone to come inside the building with them. Example, children, friends, or relatives: NO EXCEPTIONS.
27. Employees will not take unauthorized possession of items—including items left behind or unattended by passengers—or act against ordinance, policy, and regulation of TSA or the airport authority.

The above rules are for your benefit and by no means are entirely comprehensive. Violation of any one of the rules can result in a warning, written warning, or dismissal.

WHILE WORKING — PLEASE NOTICE THE FOLLOWING AND REPORT TO A SUPERVISOR

- Anything broken and how it happened [if known]
- Any office key will not open
- Offices left unlocked by tenants
- Anyone that asks you not to clean
- Any request from tenants
- Any unusual occurrences
- Any persons in the office, suite, or area when you leave after cleaning
- Burned out lights
- Stopped up or leaking faucets and commodes
- Any person requesting access to an office without a key. (They will be referred to the security guard for admission).

When finished, turn off all lights and lock all offices that were locked, turn in key, and clock out.

- If there are any questions, please see your supervisor. Your supervisor is available to discuss any of the rules. If there are any questions, please see your supervisor for discussion. Report all complaints to supervisor or to HR at 972-241-8131 X109.

This is to notify you that any violation of the above or other MBM rules may result in termination of your employment. These rules are an incomplete listing of actions or offenses that may result in disciplinary response.

Upon being hired by Member's Building Maintenance, all employees must serve a 90-day orientation period. Upon satisfactory completion, you are not entitled for any specific term, but you may participate in many of the company's employee benefits, both before and after your orientation period. You may quit or may be terminated without cause, as your employment is at all times at will.

I have received a copy of Member's Building Maintenance Company Policies. I agree to abide by these rules and understand that failure to do so will result in disciplinary action up to and including discharge.

SIGNATURE _____ PRINT NAME _____ DATE _____



MEMBER'S

Building Maintenance, LLC.

Members will need this information to fill application. Your information will be kept confidential.

Los miembros necesitarán esta información para completar la solicitud. Tu información se mantendrá confidencial.

First Name / Nombre de pila : _____

Last: Name / Apellido: _____

Middle Name / Segundo nombre : _____

Date of Birth / Fecha de nacimiento: _____

Home Address / Direccion de casa: _____

APT Number: _____

City, State, & Zip Code / Ciudad (*): Estado (*): Código postal::

Social Security # / Número de seguridad social : _____

First 3: Middle 2: Last 4:

Phone Number / Número de teléfono : _____

Application Date / Fecha de aplicacion: _____

Hire Date / Fecha de contratación: _____

DL # _____ Expirations Date: _____

Permanent Resident Card Yes No

USCIS #: _____ Expirations Date: _____