## Careful Care Cleaning Job Application



Please complete the form	n below. * Indicates mandatory fields.
Your Name: *	
Your Email: *	
Telephone: *	
Address: *	
Town / City: *	Postcode *
Best time to call: *	AM PM
Do you have a driver's lice	ence? * YES NO
If yes, how long held?	
Are you currently employ	ved? * YES NO
What is your current com	pany and position?
What notice period to yo	u have?
Do you have any work ex	perience in the cleaning industry? * YES NO
What do you like about c	leaning?
Do you or any close relati	ions have a criminal record? * YES NO
All of our contractors hav	re to be CRB checked.' (Exclude speeding or similar minor road traffic incidents)
If yes please provide deta	nils:
Please provide any other	relevant Information:
The information I have pr	ovided is correct
Signed	Date