

 <p>FREEMAN SERVICES GROUP</p> <p>FREEMANSVCSLLC@GMAIL.COM 321-378-3113 WWW.FREEMANSVCS.GF9</p>	
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Client Application

General Information					
Full Name:				Date:	
	Last	First	M.I.		
Address:					
	Street Address				Apartment/Unit #
	City			State	ZIP Code
Phone:			Email		
Date of Birth:		Last 4 of SSNo.:			
Are you legally authorized to be employed in the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you currently employed?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked with this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you have a Diploma or GED?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
*Have you ever been convicted of a crime?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you currently have a disability?		
*If yes, briefly explain.....					

Disclaimers and Signature

NOTE: This document **IS NOT an application for employment; It is a "client application". Freeman Services Group is solely dedicated to the career advancement of employees who belong to target groups indicated in the Fair Chance Hiring Act of 2021 and the Americans with Disabilities Act of 1990.*

I certify that my answers are true and complete to the best of my knowledge.

If I become a client of Freeman Services Group, I understand that false or misleading information on the Client application, or during an interview, may result in my removal from the Freeman Services Group.

Signature/Initials:		Date:	
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