



9658 Baltimore Avenue, #105, College Park, MD 20740 Fax # (301) 623-0182

Application for Employment

Southern Management Corporation is an equal opportunity employer committed to empowering a diverse workforce. We consider all applications for all positions without regard to race, color, religion, gender, sexual orientation, national origin, age, physical or mental disability, marital or veteran status, or any other legally protected status. No questions on this application will be used for discriminatory purposes. Reasonable accommodations will be made for individuals with disabilities, where it would not impose an undue hardship upon the employer.

Conditions of Employment

Southern Management Corporation (SMC) sets high standards for its team members. Compliance with these standards is a Condition of Employment. You need to carefully consider these requirements before accepting a position with us. As a team member, you will be expected to comply in full.

Customer Service

- Treat customers with an exceptionally friendly attitude at all times under all circumstances.
- Comply with all Federal, State, and local Fair Housing laws.

Attendance/Punctuality

- Always report to work when scheduled and on time.
- Call your supervisor before your scheduled work time whenever you will be out unexpectedly.

Personal Appearance

- Maintain business-like, professional appearance & grooming, see Business Uniform Attire Policy.
- Wear your SMC name badge at all times if your position requires you to do so.

Work Environment

- Smoke-Free
- Safety Focused
- Cooperative Team Oriented
- Zero Tolerance Policy

(PLEASE PRINT) Be thorough and accurate with all information you provide

Date of Application _____

Position(s) Applied for _____

Salary/Rate Desired _____

Referral Source: Internet College Recruit Job Line Rehire
 Relative Job Fair Advertisement Team Member Referral _____
 Walk-In Trade School Non-profit Org. Other _____

Name _____
Last First Middle

Address _____
Number Street City State Zip

Email _____ Cell Phone (____) ____ - _____

Telephone (DAY) (____) ____ - _____ (EVENING) (____) ____ - _____ Soc. Sec. No. (last 4 digits) _____

If employed and you are under 18, can you furnish a work permit as required in the State of Maryland? (not applicable in Virginia) Yes No

Have you filed an application with SMC before? Yes No If yes, give date & location _____

Have you ever been interviewed at SMC before? Yes No If yes, give date _____

Have you ever been employed with SMC before? Yes No If yes, give date _____

Are you employed now? Yes No May we contact your present employer? Yes No

Are you authorized to work in the United States? Yes No (Proof of eligibility to work in the U.S. is required)

On what date would you be available for work? _____

Are you available to work: full time part time shift work temporary any

Have you ever been convicted or pleaded guilty to a crime? Yes No If yes, please explain _____
(Conviction of a criminal offense will not automatically bar a person from employment)

Do you have any relatives (excluding spouse) who work for SMC? Yes No If yes, please explain _____

Education

Last Name _____

	High School	College/University Technical/Trade	Graduate or other Professional Training
School Name ⇨ ⇨ ⇨ (each block as it applies)	School Name:	School Name:	School Name:
Years Completed (circle one)	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree Describe Course of Study	_____	_____	_____
Describe Specialized Training, Apprenticeship, Skills			
Extracurricular Activities/ Honors Received			

Maintenance Skills (To be completed by maintenance applicants only)

Are you CFC certified? Yes No

I want to live-on at the apartment community? Yes No

I want to live-off of the apartment community? Yes No

Employment History (Give at least a 5 year history)

Start with your present or most recent job. Include military service assignments and volunteer activities.

Please complete this section entirely, even if you are attaching a resume.

Employer	Telephone #	<u>Dates Employed</u> From: (month & year)	Work Performed (please complete in detail even if a resume is attached) _____ _____ _____ _____ _____
Address		To: (month & year)	
Job Title		<u>Hourly Rate/Salary</u> Starting:	
Supervisor		Final:	
Reason for Leaving (voluntary or involuntary - please explain)			

Employer	Telephone #	<u>Dates Employed</u> From: (month & year)	Work Performed (please complete in detail even if a resume is attached) _____ _____ _____ _____ _____
Address		To: (month & year)	
Job Title		<u>Hourly Rate/Salary</u> Starting:	
Supervisor		Final:	
Reason for Leaving (voluntary or involuntary - please explain)			

Employer	Telephone #	<u>Dates Employed</u> From: (month & year)	Work Performed (please complete in detail even if a resume is attached) _____ _____ _____ _____ _____
Address		To: (month & year)	
Job Title		<u>Hourly Rate/Salary</u> Starting:	
Supervisor		Final:	
Reason for Leaving (voluntary or involuntary - please explain)			

Employer	Telephone #	<u>Dates Employed</u> From: (month & year)	Work Performed (please complete in detail even if a resume is attached) _____ _____ _____ _____ _____
Address		To: (month & year)	
Job Title		<u>Hourly Rate/Salary</u> Starting:	
Supervisor		Final:	
Reason for Leaving (voluntary or involuntary - please explain)			

Employer	Telephone #	<u>Dates Employed</u> From: (month & year)	Work Performed (please complete in detail even if a resume is attached) _____ _____ _____ _____ _____
Address		To: (month & year)	
Job Title		<u>Hourly Rate/Salary</u> Starting:	
Supervisor		Final:	
Reason for Leaving (voluntary or involuntary - please explain)			

State any additional information you feel may be helpful to us in considering your application.

Last Name _____

TO BE COMPLETED BY ALL APPLICANTS

Do you possess a valid Drivers License or State Identification Card? Yes No

If your answer is yes, please state jurisdiction in which License/Identification Card was issued _____

Drivers License # _____ or State Identification Card# _____

Expiration Date _____ Type _____

Are you able to travel within the DC Metro Area? Yes No

Applicant's Statement

UNDER STATE LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT TO EXCEED \$100.

NOTE: ALL APPLICANTS ACKNOWLEDGE THE NOTICE ABOVE, BY SIGNING BELOW.

I certify that the information I have provided in this application is true and complete to the best of my knowledge and belief. I understand that any false or misleading information or misrepresentations by omission in my application form or any related document, interview(s), or other aspect of my application may result in my disqualification as a candidate for employment, or my immediate discharge if I am already employed.

I understand that Southern Management has a policy of supplementing and completing the information provided in its employment application by checking this information with the educational institutions, former employers and references listed herein. I hereby release such educational institutions, employers and persons from any and all liability for furnishing such information to Southern Management or any agent acting on its behalf. I permit Southern Management to show any such entity or person a copy of this application and this acknowledgement of consent.

I understand that nothing in this application or any related document, interview(s), or other aspect of the application process constitutes an express or implied contract for initial or continued employment. If an employment relationship is established, I understand that my employment is "at will," and that both the Company and I have a right to terminate my employment at any time, with or without cause.

Upon termination of my employment, I will leave with the company the following items, including copies thereof, whether prepared by me or others: (a) all documents, records, notebooks, customer lists, supplier lists and similar items, and (b) items containing confidential information of any type. I will also leave with the company all equipment including, but not limited to, cell phones, laptop computers, tools, and any similar items.

Applicant's signature _____ Date _____

⇒ ⇒ ⇒ **FOR OFFICE USE ONLY. DO NOT WRITE IN THIS SPACE.** ⇐ ⇐ ⇐

ASSESSMENTS TAKEN: _____ LEASING _____ ADMIN _____ BOOKKEEPER _____ SERVICE TECH _____ OTHER

LOCATION(S) _____ INTERVIEWER _____ DATE _____