

SUPPLEMENT TO APPLICATION - CUSTODIAN

Name: _____

Date: _____

1. Please rate your general level of ability in the following areas by using the chart below that best describes your capabilities.

0 = No knowledge and/or experience
1 = Some knowledge and/or experience

2 = Good knowledge and/or experience
3 = Highly skilled

Custodial

- ___ Cleaning Procedures
- ___ Building Maintenance
- ___ Replace building light bulbs
- ___ Cleaning Materials & Supplies

General Safety Procedures

- ___ Equipment Maintenance
- ___ Safety Data Sheets
- ___ Public Relations
- ___ First Aid

Equipment Operation

- ___ Floor Buffer
- ___ Floor Scrubber
- ___ Floor Stripper
- ___ Carpet Shampooer
- ___ Vacuum

Construction

- ___ Basic Carpentry
- ___ Painting
- ___ Plastering
- ___ Plumbing
- ___ Basic Electrical

2. List any special licenses, certification and training courses:

Please describe the experience that you have in the following. If none, write "N/A":

3. Describe your janitorial experience and indicate if obtained through personal work, at home, or for some type of janitorial position. Include working alone or with a crew.

4. Describe your experience with basic facility maintenance.

5. Describe your experience working with the public.