

Accountable Management Employment and Certification Application

Applicant(s) : _____ Date: _____

Complete each form below . If you need more space than provided, use the back of the form or make additional copies as needed and indicate what section you are responding to.

Enclosed are the following:

Character and Professional References Form

Each will be mailed a Confidential Reference Form to complete and return to Accountable Management.

Applicant Information Form – Part I & II

If any single area does not apply to you, place “N/A” in the space. (Not Applicable)

Self Storage Experience (Parts I, II, & III)

Work Experience Form (Non Storage Related)

Storage Employment History (Occupancy)

Personal Ideas Form

Personal and Professional Skill Form

Personal Statement Form

IMPORTANT:

Mail them back to:

Human Relations Administrator
Accountable Management & Realty, Inc.
25344 Wesley Chapel Blvd.
Lutz, Florida 33559

Date Applicant Received Packet _____ Date Mailed for Processing _____

Office use only: Date Received:

Accountable Management Employment and Certification Application

Applicant Information Part I

Name	First	M.I.	Last
Address			
City		State	Zip
Phone		Email Address	
Language(s) Spoken:			
Have you been employed under any other name? [] No [] Yes If yes, identify			

Education

Name of School	Date and Years Completed	Certificate Diploma/Degree
High School		
College		
Graduate Studies		
Technical School		
Industry Related		

List Hobbies or Special Interests

We are an Equal Opportunity Drug Free Work Place.

Accountable Management Employment and Certification Application

Applicant Information – Part II

POSITION	
Check one Position and one Term	
Position Applying for	Terms of preference:
<input type="checkbox"/> Residential Manager/Couple	<input type="checkbox"/> Long term – first available
<input type="checkbox"/> Residential Manager/Single	<input type="checkbox"/> Long term – new startup property
<input type="checkbox"/> Non-Resident Manager/Couple	<input type="checkbox"/> Long term – establish property
<input type="checkbox"/> Non-Resident Manager/Single	<input type="checkbox"/> Short term – first available
<input type="checkbox"/> Assistant Manager	<input type="checkbox"/> Short term – new startup property
<input type="checkbox"/> Other Please specify:	<input type="checkbox"/> Short term – receivership/turn over
LOCATION	
Check All Area(s) of Interest	
<input type="checkbox"/> Northern Florida	
<input type="checkbox"/> Central Florida	
<input type="checkbox"/> Southern Florida	
<input type="checkbox"/> East Coast	
<input type="checkbox"/> West Coast	
<input type="checkbox"/> No preference – anywhere an opportunity presents itself	
<input type="checkbox"/> Other Please specify: _____	
COMPUTER SKILLS	
Check All Area(s) you are familiar with and proficient at	
<input type="checkbox"/> Microsoft Excel	
<input type="checkbox"/> Microsoft Word	
<input type="checkbox"/> Microsoft Publisher	
<input type="checkbox"/> Winsen	
<input type="checkbox"/> Site Link	
<input type="checkbox"/> Sentinel	
<input type="checkbox"/> Internet / Computer Skills	
<input type="checkbox"/> Other Please specify: _____	

Accountable Management Employment and Certification Application

CUSTOMER SERVICE

Explain any Special Customer Services that you have been involved

COLLECTIONS/PAST DUE ACTIVITIES

What type of collection/past due activities did you perform at this store and how many hours per week did you perform these duties?

MAJOR FIRE / SEVERE WEATHER DAMAGE

Did you experience any major fire or severe weather damage to the store? [] No [] Yes
If Yes, please explain

Accountable Management Employment and Certification Application

Personal Ideas

Applicant Name: _____

FACILITY

Describe your ideal facility and its preferred location: _____

HOT BUTTONS

Describe those things that upset or irritate you: _____

INSPIRATION

Describe those things that inspire you: _____

ADDITIONAL REASONS

Give any additional information that would make Accountable Management want to hire you:

Accountable Management Employment and Certification Application

Work Experience

Complete this form for each non-self storage related employment for the past 3 years.

ApplicantName:

Date:

Name of Company	
Address	
Name of Supervisor	Phone #:
Job Title	
Basic Description of Responsibilities:	
Describe how you used the telephone with this employment.	
Did you work alone or with someone or a group? Please explain.	
Describe the kind of paperwork or reports that were your responsibility.	
What kind of meetings did you have to attend? Describe	
Describe the training workshops, seminars, etc you received during your employment with this company	
Employed from	to
Reason for leaving	

Accountable Management Employment and Certification Application

PERSONAL STATEMENT

Name: _____

Please compose a brief summary explaining your interest in the Self Storage industry and working for **Accountable Management**:

Applicant's Signature _____ Date _____

Accountable Management Employment and Certification Application

PERSONAL AND PROFESSIONAL SKILL

Applicant: _____

Describe both personal and professional skills that you believe are of value to the position to which you are applying (for example, coaching, group leader, office machines, typing, computer skills, computer programs (i.e. Microsoft Office, Excel, WordPerfect, ,etc.).

PERSONAL

PROFESSIONAL

Applicant's Signature _____ Date _____

Accountable Management Employment and Certification Application

PROFESSIONAL REFERENCES

Applicant: _____ Date: _____

Applicant is to list names for character and professional references who are not family related.

Each will be mailed a confidential reference form to complete and mail back to Accountable Management.

**PRESENT EMPLOYER (if okay to call):
A supervisor you worked under**

Name _____ Relation _____

Address _____

City/State/Zip _____

Home _____ Business Phone _____

Date Sent:	Date Received:	Recommendation:	HIRE	NOT
------------	----------------	-----------------	------	-----

**PREVIOUS EMPLOYER:
A supervisor you worked under**

Name _____ Type of Business _____

Address _____

City/State/Zip _____

Home _____ Business Phone _____

Date Sent:	Date Received:	Recommendation:	HIRE	NOT
------------	----------------	-----------------	------	-----

VENDOR OR CUSTOMER

Name _____ Vendor or Customer (circle one)

Address _____

City/State/Zip _____

Home _____ Business Phone _____

Date Sent:	Date Received:	Recommendation:	HIRE	NOT
------------	----------------	-----------------	------	-----

Signature of Applicant _____ Date _____

Accountable Management Employment and Certification Application

Work Experience

Complete this form for each non-self storage related employment for the past 3 years.

ApplicantName:

Date:

Name of Company
Address
Name of Supervisor
Job Title
Basic Description of Responsibilities:
Describe how you used the telephone with this employment.
Did you work alone or with someone or a group? Please explain.
Describe the kind of paperwork or reports that were your responsibility.
What kind of meetings did you have to attend? Describe
Describe the training workshops, seminars, etc you received during your employment with this company
Employed from _____ to _____
Reason for leaving

Accountable Management Employment and Certification Application

Work Experience

Complete this form for each non-self storage related employment for the past 3 years.

ApplicantName:

Date:

Name of Company
Address
Name of Supervisor
Job Title
Basic Description of Responsibilities:
Describe how you used the telephone with this employment.
Did you work alone or with someone or a group? Please explain.
Describe the kind of paperwork or reports that were your responsibility.
What kind of meetings did you have to attend? Describe
Describe the training workshops, seminars, etc you received during your employment with this company
Employed from _____ to _____
Reason for Leaving: