



EMPLOYMENT APPLICATION

Please read carefully!

Warning:

1. All questions must be answered fully.
2. Not responding to a question or filling out any other form contained in this application completely may disqualify the applicant from consideration for hire.

Applications are kept current in our system for a period of twelve (12) months. If you wish to be considered for work after that time you must complete a new application.

Instructions:

1. Answer all questions in legible print or writing.
2. Not responding to a question or filling out any other form contained in this application completely may disqualify the applicant from consideration for hire.

Today's Date: _____

SECTION 1 – Personal Information

Personal Information: _____ DL or ID#: _____
(Last) (First) (Middle Initial)

Social Security #: _____ - _____ - _____ Date of Birth: _____ / _____ / _____

Current Address: _____
(Number) (Street) (Apt #)

(City) (State) (Zip Code)

Phone Numbers: () - () - () -
(1st Choice) (2nd Choice) (3rd Choice)

Emergency Contact: _____ () -
(Name) (Relationship) (Phone Number)

Email Address: _____

Are you over the age of (18) Yes No Are you a U.S. Citizen? Yes No If you are not a U.S. Citizen, are you eligible for employment under the immigration laws of the United States? Yes No NA

Have you ever been known by any other name(s) that a contractor may require to verify any information regarding your application? If yes, please list them below.



Have you been convicted of a felony within the last 10 years? Yes No If yes, please explain:
(A conviction will not necessarily disqualify an applicant for employment.)

Do you have dependable transportation? Yes No If yes, Make and Model: _____

SECTION 2 – Professional Experience

Position being sought: _____ Rate of pay sought: \$ _____

Years of Experience: Commercial _____ Industrial _____ Residential _____

Please Briefly describe your experience (service, conduit bending, switchgear, etc): _____

Have you been a leadman/foreman/supervisor on any job? How long? Describe briefly: _____

SECTION 3 – Employment History

Your application will not be considered unless this section is completed. Since previous employers may be contacted, correct information about your past employment is critical. You should include Military Service Assignments.

Are you currently employed? Yes No If no, how long since last employment? _____

CURRENT EMPLOYER If not currently employed, skip to next section.

(Company Name) (City) (State) () -
(Phone Number)

Date Employment Started: ____ / ____ / ____ Job Title: _____

Supervisor's Name: _____ Wage Rate: \$ _____ per _____

PRIOR EMPLOYERS (Next Page)



PRIOR EMPLOYERS

(Company Name) _____ (City) _____ (State) _____ () _____ -
(Phone Number)

Date Employment Started: _____ / _____ / _____ To: _____ / _____ / _____

Supervisor's Name: _____ Wage Rate: \$ _____ per _____

Job Title: _____ Reason for leaving: _____

Are you eligible for rehire with this company? Yes No

(Company Name) _____ (City) _____ (State) _____ () _____ -
(Phone Number)

Date Employment Started: _____ / _____ / _____ To: _____ / _____ / _____

Supervisor's Name: _____ Wage Rate: \$ _____ per _____

Job Title: _____ Reason for leaving: _____

Are you eligible for rehire with this company? Yes No

(Company Name) _____ (City) _____ (State) _____ () _____ -
(Phone Number)

Date Employment Started: _____ / _____ / _____ To: _____ / _____ / _____

Supervisor's Name: _____ Wage Rate: \$ _____ per _____

Job Title: _____ Reason for leaving: _____

Are you eligible for rehire with this company? Yes No

SECTION 4 – Additional Information

Some customers require background and/or drug test. Would you be willing to work for these customers? Yes No

Based on your opinion of yourself and your previous employers, what kind of employee will you be regarded as?
(Circle one for each field)

Attendance	Excellent	Satisfactory	Poor
Responsibility	Excellent	Satisfactory	Poor



Attitude
Professionalism

Excellent
Excellent

Satisfactory
Satisfactory

Poor
Poor

Do you own the following: Hardhat Safety Glasses Work Boots Gloves Safety Vest

SECTION 5 – Educational Information

Do you have a: High School Diploma _____ (year graduated) GED _____ (year obtained) None

Have you: Attended College? Name of College: _____ From: _____ To: _____

Graduated? **OR** Credit Hours _____ Area of study: _____

Attended Vocational Training? Name of College: _____ From: _____

Which craft (trade)? _____ To: _____

Served an Apprenticeship? Name of Sponsoring Organization: _____

Which craft (trade)? _____ From: _____ To: _____

Any trade licensing? Which craft (trade)? _____ State: _____

Is license current? ____ Yes ____ No If available, License #: _____

SECTION 6 – Important Information and Conditions

1. I certify that all statements contained in this application or made in conjunction with it are true and correct, and any misrepresentation or omission of facts call for is grounds for rejection of my application (or will result in dismissal should I be employed) whenever the correct information becomes known to this company.
2. I acknowledge that I am aware that this company is merely a conduit through which applications are processed and, as such, are made available to our clients and that this company and its contractors do not guarantee or promise that I will be offered employment or even considered for employment by one or more of our clients, or that my application will be forwarded to a specific client. Rather, I am aware that this company makes available to its clients the active applications on file upon request by the client. I also understand that if a client of this company wishes to consider me for employment, I may be required to appear at the client's facility, execute various forms and/or be interviewed in person before I will be considered for employment by a client. I also understand the client may engage in background checking before a final decision to employ is made. I also understand that the individual company's client(s) who interview me may obtain applicants from other sources, such as former employees, word of mouth or advertising, and that individual client's may have additional employment criteria, experience requirements, testing (including drug testing) or other conditions for employment that may determine whether I have the qualifications for employment and whether I will be chosen from among other qualified applicants.

By signing below, I represent that I have read and understand the above and submit my application under these conditions.

Applicant Signature: _____ **Date:** _____

Printed Name: _____