

APPLICATION FOR EMPLOYMENT

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS.

	DATE			
Name				
Last	First	Middle	Ν	laiden
Address				
Street		City	State	Zip
How long at address:	years	Social Security No.		
Home Telephone ()		_ Cell phone ()		
Email	If under 18, please list age			
Position applied for		Days/hours available to work		
		No Pref Thur Mon Fri		
Salary desired \$	/per hour		Fri Sat _	
(Be specific)	·	Wed		
How many hours can you wo	rk weekly?	Can you wo	ork nights?	
Employment desired DFULI	L-TIME ONLY	PART-TIME ONLY	GFULL- OF	R PART-TIME
Date available for work?				

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION City, State	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME?

Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.



Γ

DO YOU HAVE A DRIVER'S LICENSE? Yes No					
What is your means of transportation to work?					
Driver's license number State of issue Expiration date					
Have you had any accidents during the past three years? How many?					
Have you had any moving violations during the pas	t three years? How Many?				
Please list two references other than relatives or previous employers.					
Name	Name				
Position	Position				
Company	Company				
Address	Address				
Telephone ()	Telephone ()				
Email	Email				
Military Experience					
HAVE YOU EVER BEEN IN THE ARMED FORCES?					
WERE YOU HONORABLY DISCHARGED? Yes No					
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?					
Specialty Date Entered Discharge Date					



Work Experience

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Street Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary	
		From	Start	
		То	Final	
	Your last job title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				

Name of employer Street Address		Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code			From	Start
Phone number			То	Final
	Your Last Job Title			
Reason for leaving (be specific)				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.				
May we contact your present employer?	Yes	🗆 No		
Did you complete this application yourself	🛛 Yes	🗆 No		

If not, who did? ____



An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Mitchell Mechanical, LLC:

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Mitchell Mechanical permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release Mitchell Mechanical from any liability as a result of such contract.

I understand that, in connection with the routine processing of your employment application, Mitchell Mechanical may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, Mitchell Mechanical, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with Mitchell Mechanical shall be introductory for a period of ninety (90) days, and further that at any time during the introductory period or thereafter, my employment relation with Mitchell Mechanical is terminable at will for any reason by either party.

Signature of applicant

Date:

Mitchell Mechanical, LLC is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Mitchell Mechanical depends solely on your qualifications.