



Employment Application

Programs, services, and employment are equally available to everyone. Please inform Calvin's Electric, Ltd. if you require reasonable accommodation for the application or interview.

Position Applied for: _____ Date of Review: _____

How were you referred to us: _____

Applicant Data

Full name (Last, First, Middle): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile/Pager/Other: _____

Email: _____

Date Available to Start: _____

Driver's license number: _____ State: _____

Social Security #: _____ Salary Requirement: _____

If you are under 18 and we require a work permit, can you furnish one? Yes No

If no, please explain: _____

Have you ever worked for this company? Yes No

If yes, when? _____

Are you a citizen of the United States? Yes No

If not, are you legally allowed to work in the United States? Yes No

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Have you ever pled "guilty," "no contest," or been convicted of a crime? Yes No

If yes, give dates and details: _____

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Employment Experience:

Place an "X" by the employer(s) you DO NOT want us to contact. List your most recent employer first.

Employer _____

Contact Name _____ E-mail _____

Address _____ Phone _____

Job Title _____ Supervisor _____

Dates employed: from (mm/yy) _____ to (mm/yy) _____

Work performed _____

Reason for leaving _____

What did you like most about your position? _____

What were the things you liked least about the position? _____

Employer _____

Contact Name _____ E-mail _____

Address _____ Phone _____

Job Title _____ Supervisor _____

Dates employed: from (mm/yy) _____ to (mm/yy) _____

Work performed _____

Reason for leaving _____

What did you like most about your position? _____

What were the things you liked least about the position? _____

Employer _____

Contact Name _____ E-mail _____

Address _____ Phone _____

Job Title _____ Supervisor _____

Dates employed: from (mm/yy) _____ to (mm/yy) _____

Work performed _____

Reason for leaving _____

What did you like most about your position? _____

What were the things you liked least about the position? _____

Employment Experience: (continued)

Have you ever been fired or asked to resign from a job? Yes No

If yes, please explain: _____

Education Background

High School: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree _____

College: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree _____

Graduate School: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree _____

Vocational Training/Other: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree _____

Continuing Education: _____

Special Training or Skills

Languages, machine operation, etc., that would be of benefit in the job for which you are applying.

Do you have an electrical license? Yes No

If yes, what type? _____ License # _____ Expiration Date _____

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application. In the event I am employed by Calvin's Electric, Ltd., I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____