

# JOB APPLICATION

It is the policy of P & C Heating and Air Conditioning, Inc. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

#### APPLICANT INFORMATION

Full Name	
Home Address	
City/State/ZIP	
Birth Date	
Email	
Mobile Phone	
Social Security Number	
Driver's License (State/#)	

1. Jo	ob Position Applied For: _	

- 2. Full or Part Time?

   3. Salary Desired: \$\_\_\_\_\_ per \_\_\_\_\_
- 4. Who referred you to our company?
  - a. Do you have any friends or relatives who work here? If yes, please list here:
- 5. Have you applied to our company previously? \_\_\_\_\_ YES \_\_\_\_\_ NO a. If yes, when?
- 6. Are you at least 18 years old? YES NO
- 7. Are you willing to work any shift, including nights and weekends? \_\_\_\_YES \_\_\_\_NO
- 8. When are you available to begin work?
- 9. If hired, are you able to submit proof that you are legally eligible for employment in the United States? YES NO
- 10. Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation? \_\_\_\_\_YES \_\_\_\_\_NO

#### APPLICANT'S SKILLS

Check these skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (1 represents poor ability, while five represents exceptional ability.)

SKILL		Years of Experience	Α	bility/R	Rating
[]	Knowledge of HVAC		1	23	45
[]	Troubleshooting		1	23	45
[]	Knowledge of Duct Work		1	23	45
[]	Duct Work Installation		1	23	45
[]	System/Unit Installation		1	23	45
[]	Service Calls/Customer Service		1	23	45
[]	Insulation: Foam & Fiberglass		1	23	45

#### APPLICANT EMPLOYMENT HISTORY

List your current or most recent employment first. Please list all jobs (including selfemployment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

t (Month/Year):	 	
		  t (Month/Year):

Employer Name:	
Supervisor Name: _	
City/State/ZIP: _	
Job Duties: _	
Reason for Leaving: $\_$	
Dates of Employment	(Month/Year):
•	
12. High School/	GED:
	receive a degree?YESNO g (graduate, technical, vocational):
14. Please indication hold:	te any current professional licenses or certification that you
15. Awards, Hone	ors, Special Achievements:

16. Military Services: \_\_\_\_YES \_\_\_\_NO

17. Branch:

\_\_\_\_

18. Specialized Training:

## REFERENCES

List any two non-relatives who would be willing to provide a reference for you.

Name:	
City/State/ZIP:	
Telephone:	
Relationship:	
Name:	
City/State/ZIP:	
Telephone:	
Relationship:	

19. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

### CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize P & C Heating and Air Conditioning, Inc. to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Manager, the employment relationship will be "at-will". In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right.

# I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT'S SIGNATURE

DATE