

Hander, Inc. Plumbing & Heating

Application for Employment

An Equal Opportunity Employer

Position(s) applied for _____ Date of Application ____/____/____

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone # (____) _____ Mobile/Beeper/Other Phone # (____) _____

Email Address _____

If you are under 18, and it is required, can you furnish a work permit? Yes No

If no, please explain _____

Have you ever been employed here before? If yes give dates and position. Yes No

Are you legally eligible for employment in the country? Yes No

Date available for work ____/____/____

Type of employment desired: _____ Full time _____ Part time _____ Shift Work _____ Temporary

Are you able to meet the attendance requirement of the position? Yes No

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if job requires? Yes No

Have you had any job-related training in the U.S. Military? Yes No

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

If yes, please provide date(s) and details _____

Answering "yes" to these questions does not constitute an automatic bar to employment. Factors such as date of the offence, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Drivers license number, if driving, is an essential job function _____ State _____

CDL license number, if driving, is an essential job function _____ State _____

Employment History - Provide the following information of your past four (4) employers, starting with the most recent.	
From:	Hourly Rate/Salary
To:	Start: \$ _____ Per: _____ Final: \$ _____ Per: _____
Employer:	Starting Job Title
Telephone # ()	Ending Job Title
Address:	May we contact for reference? YES NO LATER
Immediate Supervisor and Title	
Reason for Leaving	Job Responsibilities

From:	Hourly Rate/Salary
To:	Start: \$ _____ Per: _____ Final: \$ _____ Per: _____
Employer:	Starting Job Title
Telephone # ()	Ending Job Title
Address:	May we contact for reference? YES NO LATER
Immediate Supervisor and Title	
Reason for Leaving	Job Responsibilities

From:	Hourly Rate/Salary
To:	Start: \$ _____ Per: _____ Final: \$ _____ Per: _____
Employer:	Starting Job Title
Telephone # ()	Ending Job Title
Address:	May we contact for reference? YES NO LATER
Immediate Supervisor and Title	
Reason for Leaving	Job Responsibilities

From:	Hourly Rate/Salary
To:	Start: \$ _____ Per: _____ Final: \$ _____ Per: _____
Employer:	Starting Job Title
Telephone # ()	Ending Job Title
Address:	May we contact for reference? YES NO LATER
Immediate Supervisor and Title	
Reason for Leaving	Job Responsibilities

Skills and Qualifications - Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Education Background

Name and Location	Number of Years Completed	Did you Graduate	Course of Study
High School			
College		Major/Degree	
Other			

References

Name	Telephone	Number of Years Known
	()	
	()	
	()	

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of the application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____/____/____

Drug Screen Consent

In applying for employment, I understand that I have agreed to undergo a urine screening test to determine the presence of certain drugs and alcohol. I further understand that the presence of one or more of those drugs or alcohol may cause my rejection from further consideration for employment.

I hereby authorize Hander, Inc. Plumbing & Heating to conduct, through its designated physician or laboratory testing facility, a drug screening test as a requirement of employment.

I also understand that refusal to submit to the drug and alcohol screening test will constitute voluntary withdrawal of my application for employment.

Signature of Applicant _____ Date ____/____/____