Application for Employment

Sunstate Mechanical Services is an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, service, and programs is available to all person. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name: _____ Date: _____

Position(s) applying for, or type of work desired: _____

Address: _____

Telephone #: _____Social Security #: _____

Type of employment desired: _____Full time _____Part-time _____Temp

Date available to start work: _____

Are you able to meet the attendance requirements? _____Yes _____No

Do you have any objection to working overtime if necessary? _____Yes _____No

Can you travel if required by this position? _____Yes _____No

Have you ever been previously employed by our organization? _____Yes _____No

Can you submit proof of legal employment authorization and identity? _____Yes _____No

If you are under 18, can you furnish a work permit if it is required? _____Yes _____No

Have you ever been convicted of a crime in the last 7 years? _____Yes _____No

- If yes, please explain (a conviction will not automatically bar employment:

_____

_____

Driver's license number (if driving is an essential job duty): _____State:_____

How were you referred to us? _____

EMPLYMENT HISTORY

Please provide all employment information for your past four employers, starting with the most recent:

Employer 1: _____Position: _____

Address: _____Telephone: _____

Immediate Supervisor and Title: _____

Job Summary: _____

Reason for Leaving: _____

Employer 2: _____Position: _____

Address: _____Telephone: _____

Immediate Supervisor and Title: _____

Job Summary: _____

Reason for Leaving: _____

Employer 3: _____Position: _____

Address: _____Telephone: _____

Immediate Supervisor and Title: _____

Job Summary: _____

Reason for Leaving: _____

Employer 4: _____Position: _____

Address: _____Telephone: _____

Immediate Supervisor and Title: _____

Job Summary: _____

Reason for Leaving: _____

OTHER SKILLS AND QUALIFICATIONS

Summarize any job-related training, skills, licenses, certifications, and/or other:

_____

_____

_____

EDUCATIONAL HISTORY

List school name and location, years completed, course of study, and any degrees earned:

High School: _____

College: _____

Technical Training: _____

Other: _____

REFERENCES

List three (3) references. Include names, telephone numbers, and years known (do not include relatives or employers.

1. _____

2. _____

3. _____

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment, and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is o violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant's Signature: _____Date: _____

Applicant's Typed or Printed Name: _____