EMPLOYMENT APPLICATION An Equal Opportunity Employer

Please Print				Date	
Name					
		Last	First	Middle	
Business Telepho	one ()	Home Telephone ()	
Social Security N	No		_		
Present Address					
	No.	Street	City	State	Zip
Permanent Addre	ess if di	fferent from prese	ent address:		
	No.	Street	City	State	Zip
Employment De	esired				
Position applying	g for:				
Are you applying	g for:				
Regular	full-tin	ne work?		Yes 🗆	No 🗆
Regular	part-tii	me work?		Yes 🗆	No 🗆
Tempor	ary woi	rk, e.g. summer or	holiday work?	Yes 🗆	No 🗆
What days and h	ours are	e you available foi	r work?		
If applying for te	emporar	y work, during wl	hat period of time will you be availa	ble?	
From					
Are you available	e for wo	ork on weekends?		Yes 🗆	No 🗆
Would you be av	ailable	to work overtime,	, if necessary?	Yes 🗆	No 🗆
On what date car	1 you st	art work?			
Salary desired:					
Personal Inform	nation				
Have you ever ap	oplied to	o or work for the (Company Before?	Yes 🗆	No 🗆
If yes, when?					
Do you have any	friends	s or relatives work	ting for the Company?	Yes 🗆	No 🗆
If yes, state name	e(s) and	relationship:			
If hired, would y	ou have	e reliable means of	f transportation to and from work?	Yes 🗆	No 🗆
Are you at least 1	18 year	old? (If under 18,	hire is subject to verification that ye	ou are	
of minimum lega	al age.).			Yes 🗆	No 🗆

Do you have the legal right to work and be employed in the United States?	
(Proof of identity and legal authority to work in the U.S. is a condition of employment)Yes \Box	No 🗆
Are you able to perform the functions of the job for which you are applying with or	
without reasonable accommodation?Yes	No 🗆
If no, describe the function that you can not perform:	

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for and any other relevant factors are considered.)

 Are you currently employed?......Yes
 No

 If so, may we contact your current employer?.....Yes
 No

Education, Training and Experience

School	Name & Address	# of Years	Did you	Degree or	GPA
		Completed	Graduate?	Diploma	A= 4.0
II: -1. C -11			Vac		

High School	Yes
	No
College /	Yes
University	No
Vocational /	Yes
Business	No
Other	Yes
	No

What are your hobbies, special interests, and extracurricular activities? (Please omit those which indicate your race, color, religion, sex, national origin, ancestry, age, or the existence of a disability.)_____

Employment History

List below all present and past employment for the last 10 years, starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume. Name of Employer_____

Address				
No.	Street	City	State	Zip
Type of Business				
Telephone No. ()	Your Supe	rvisor's Name	
Your Position and Du	ities			
Major Accomplishme	ents			
Date of Employment:	From		То	
Weekly Pay: Starting			Ending	
Reason For Leaving:				
	ou eligible for rehire?			
No.	Street	City	State	Zip
Type of Business				
Telephone No. ()	Your Supe	rvisor's Name	
Your Position and Du	ities			
Major Accomplishme	ents			
Date of Employment:	From		То	
Weekly Pay: Starting			Ending	
Reason For Leaving:				

Upon leaving, were you eligible for rehire? Yes \Box \quad No $\quad\Box$

Address City State Zip Type of Business	Name of Employer_				
Type of BusinessYour Supervisor's NameYour Position and Duties Major Accomplishments Ending Reason For Leaving: Ending Upon leaving, were you eligible for rehire? Yes No. Street City State Zip Type of Business No. Street City State Zip Type of Business Telephone No. ()Your Supervisor's Name Your Position and Duties Major Accomplishments Major Accomplishments Major Accomplishments Major Accomplishments Major Accomplishments Major Accomplishments Date of Employment: From To Meekly Pay: Starting To	Address				
Your Position and Duties Your Position and Duties Major Accomplishments Date of Employment: From To Weekly Pay: Starting Ending Reason For Leaving: Upon leaving, were you eligible for rehire? Yes No Name of Employer Address No. Street City State Zip Type of Business Telephone No. ()Your Supervisor's Name Your Position and Duties Major Accomplishments Date of Employment: From To Weekly Pay: Starting To Weekly Pay: Starting Ending	No.	Street	City	State	Zip
Your Position and Duties	Type of Business				
Major Accomplishments	Telephone No. ()	Your Super	rvisor's Name	
Date of Employment: From To Weekly Pay: Starting Ending Reason For Leaving: Reason For Leaving: Upon leaving, were you eligible for rehire? Yes No Name of Employer Address No. Street City State Zip Type of Business Telephone No. ()Your Supervisor's Name Your Position and Duties Major Accomplishments Date of Employment: From To Weekly Pay: Starting Ending	Your Position and D	uties			
Date of Employment: From To Weekly Pay: Starting Ending Reason For Leaving: Reason For Leaving: Upon leaving, were you eligible for rehire? Yes No Name of Employer Address No. Street City State Zip Type of Business Telephone No. ()Your Supervisor's Name Your Position and Duties Major Accomplishments Date of Employment: From To Weekly Pay: Starting Ending					
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Reason For Leaving:	Date of Employmen	t: From		To	
Upon leaving, were you eligible for rehire? Yes No Name of Employer	Weekly Pay: Starting	g		Ending	
Name of Employer	Reason For Leaving	:			
No. Street City State Zip Type of Business					
Type of Business Telephone No. ()Your Supervisor's Name Your Position and DutiesYour Supervisor's Name Your Position and Duties	Address				
Telephone No. ()Your Supervisor's Name Your Position and Duties Major Accomplishments Date of Employment: From To Weekly Pay: Starting Ending	No.	Street	City	State	Zip
Your Position and Duties Major Accomplishments Date of Employment: From To Weekly Pay: Starting Ending	Type of Business				
Major Accomplishments To To Weekly Pay: Starting Ending	Telephone No. ()	Your Super	rvisor's Name	
Date of Employment: From To Weekly Pay: Starting Ending	Your Position and D	uties			
Weekly Pay: Starting Ending	Major Accomplishm	ients			
	Date of Employmen	t: From		То	
Reason For Leaving:	Weekly Pay: Starting	g		Ending	
	Reason For Leaving	:			

Upon leaving, were you eligible for rehire? Yes \Box No \Box

Note: Attach additional page(s) if necessary

Please identify and ex	xplain all periods of	unemployment during the las	t 10 years:	
From	То	Reason for unem	ployment	
Please set the number	r of days you were a	bsent from work in the last 12	2 months:	
References				
List below three perso	ons not related to yo	ou who have knowledge of you	ur work performance	within the last
three years.				
Name				
Address				
No.	Street	City	State	Zip
Occupation				
Telephone No. ()	Number of years acqu	ainted	
Name				
Address				
No.	Street	City	State	Zip
Occupation				
Telephone No. ()	Number of years acqu	ainted	
Name				
Address				
No.	Street	City	State	Zip
Occupation				
Telephone No. ()	Number of years acqu	ainted	

The Company is an equal employment opportunity employer and does not discriminate in hiring of employment upon any basis prohibited by law, including race, color, creed, religion, age, sex, national origin, ancestry, sexual orientation, marital status, military status, or disability. None of the questions or information sought in this application are intended to discriminate based upon any status protected by law.

APPLICATION CONTINUED ON NEXT PAGE

Please Read Carefully, Initial Each Paragraph and Sign Below:

I hereby certify that the answers given by me on this application are true and correct to the best of my knowledge. I understand that any misstatement or omission of fact on this application or any supporting documents may result in rejection of this application or immediate discharge if I am employed, regardless of the time elapsed before discovery of the misstatement or omission. I hereby authorize the Company to investigate my references, prior employers, work record, education and other matters related to my suitability for employment and further, authorize the references I have listed, all prior employers, and all educational institutions attended, to disclose to the Company any and all letters, reports and or other information related to my records, including but not limited to my personnel files and all other employment information, without giving me prior notice of such disclosure. By providing this page of the application to the references, prior employers and educational institutions attended, I release them to the fullest extent permitted by law from any and all claims, demands, fees, and liabilities for providing the Company with all information, and I release the Company and its agents, employees, or representatives to the fullest extent permitted by law from any and all claims, demands, fees and liabilities that may result from any use or disclosure of such information by the Company or any of its agents, employees, or representatives.

I understand that if I am employed by the Company, such employment is at the mutual consent of me and the Company. Accordingly, either I or the Company may terminate my employment at any time, with or without cause, and with or without notice. I understand that except for _______, no employee, representative or agent of the Company has authority to modify the at-will nature of my employment. Any modification of the at-will nature of my employment, or any employment agreement for a specified period of time with the Company must be set forth in a written agreement signed and dated by me and _______. Moreover nothing conveyed to me either during any pre-employment interview, or during my employment, if hired is intended to create an employment contract between me and the Company, or to altar the at-will nature of my employment with the Company. In addition I understand that if hired by the Company, this statement shall constitute a final and fully binding integrated agreement with respect to the at will nature of my employment relationship and that there are no oral or collateral agreements contrary to the foregoing.

Date _____ Applicant's Signature____

PRE-INTERVIEW QUESTIONNAIRE

	DATE:
How	much experience do you have in each of the following areas?
a)	Residential:
b)	Commercial:
c)	Industrial:
d)	Blueprint reading:
e)	Bending pipe:
What	are you looking for in a potential employer?
What	type of company are you interested in working for?
Why	do you feel you are qualified for the position(s) being offered?

How many pieces are there to an 8'x10' Edison th	
What is the minimum cover required by Edison o	-
What is the minimum separation that is required la common trench?	*
When does Edison require concrete encasement?	
when does Edison require concrete cheasement.	
List standard wire colors for 120/208v 3Ø 4w sys	stem. Phase A=
	B=
	C=
	Neutral=
List standard wire colors for 277/480v 3Ø 4w sys	stem. Phase A=
	B=
	C=
	Neutral=
What size THHN cu wire is required for 200A at	75°c?
What size THHN cu wire is required for 225A at	75°c?
What size THHN cu wire is required for 400A at	75°c?
What is standard A.I.C. rating for 277/480v 3Ø 4	wire Edison service?
What section of N.E.C. covers grounding?	
When is GFI protection required on the main swi	tchboard?
What is the maximum degree of bends allowed in another?	-
What is standard color for circuit #33 in a 120/20	8v 3Ø 4w system?
What is standard color for circuit #38 in a 277/48	0v 3Ø 4w system?
Circle which conduit size is not a common trade s	size.
¹ / ₂ " ³ / ₄ " 1" 1 ¹ / ₄ " 1 ¹ / ₂ " 1 ³ / ₄ "	" 2"
When are myers hubs required?	
At what intervals are conduit supports required for	or the following:
A. EMT ½-4"	Ū.
B. Flex ¹ /2-4"	
B. Flex ¹ / ₂ -4" When is a ground bushing required?	

- 20. What is the correct nema number of each application listed?
 - A. Indoor nema _____
 - B. Raintight nema ____

21. What is the maximum wattage aloud by code on a 20 amp 1-pole circuit breaker at 120v?

22. Minimum coverage for:

- A. PVC conduit under a building slab? ______
 B. PVC conduit under a driveway/parking lot? ______
- C. PVC conduit in a planter? _____
- 23. How many #12 THHN's can you put in a ¹/₂" EMT with out derating? _____
- 24. How many #12 THHN's can you put in a 4's shallow box with a 4s blank? _____

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with this organization is of an "at-will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at-will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

-	
Date	

OR PERSO	DNNEL	DEPARTMENT USE ONLY
		INTERVIEWER DATE
Yes 🗆	No 🗆	Date of Employment
	Н	lourly rate / Salary
TITLE		DATE
	Yes 🗆	

NOTES: ____

Position(s) applied for is open:	Yes 🗆	No 🗆	
Position(s) considered for:			
Date:			

NOTES: ______ ____
