



ELECTRIC MOTOR SERVICES, INC.

Employment Application

APPLICANT INFORMATION										
Last Name				First				M.I.	Date	
Street Address							Apartment/Unit #			
City				State				ZIP		
Phone				E-mail Address						
Date Available				Social Security No.				Desired Salary		
Position Applied for										
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>					
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain							
Have you ever been convicted of a crime?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain							
Do you have your means of transportation to work?	YES <input type="checkbox"/>	NO <input type="checkbox"/>								
Driver's license #				State of Issue				Expiration Date		
EDUCATION										
High School				Address						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
College				Address						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other				Address						
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
REFERENCES										
<i>Please list two professional references.</i>										
Full Name				Relationship						
Company				Phone	()					
Address										
Full Name				Relationship						
Company				Phone	()					
Address										

PREVIOUS EMPLOYMENT										
Company						Phone	()			
Address						Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Company						Phone	()			
Address						Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Company						Phone	()			
Address						Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Company						Phone	()			
Address						Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
DAYS/HOURS AVAILABLE TO WORK										
No Pref.		Monday		Tuesday		Wednesday				
Thursday		Friday		Saturday		Sunday				
When are you available to work? _____				F/T	<input type="checkbox"/>	P/T	<input type="checkbox"/>			
MILITARY SERVICE										
Branch						From		To		
Rank at Discharge						Type of Discharge				
If other than honorable, explain										
DISCLAIMER AND SIGNATURE										
I certify that my answers are true and complete to the best of my knowledge.										
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.										
Signature						Date				



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Experience Checklist

Please check (☑) all the skills you have experience in and a working knowledge of. If you have other skills, please list those.

☑	☑
<u>Mechanics</u>	<u>Machinist</u>
Crane	Blueprint Reading
Forklift	Dimension Inspection
Hydraulic Press	Manual Lathe
Gear Pullers	Manual Mill
Own work tools & work chest	Horizontal Bar Bill
Electric Motor Teardown	Line Boring
Electric Motor Repairs	Drill Press
Pinion Application	CNC Mill (Types: _____)
Soldering Leads / Lugs	
Bearing Replacements	CNC Lathe (Types: _____)
Field / Interpole Replacement	
	CNC Programming; Yes <input type="checkbox"/> or No <input type="checkbox"/>
<u>Testing</u>	
Megger Testing	Making shafts on lathes
HIPOT Testing (AC/DC)	Turn and Undercut Commutators
Motor Test Stands	Turn and sleeve endbells
Bar-To-Bar Testing	Balancing Armatures / Rotors
Core Loss Testing	
Surge Testing	
Digital Multi Meter	
Surge Testing	
Digital Multi Meter	<u>Winders</u>
	Armature Winding
<u>Welders & Repairs</u>	Coil or Interpole Winding
MIG Welding	
TIG Welding	
Spray Welding	<u>Drivers</u>
Other Welding (_____)	CDL License Number
Frame repairs / Bolt Holes	Other License (Explain: _____)
Torch Cutting / Air Arcing	
Aluminum Welding	
Certified Welder; Yes <input type="checkbox"/> or No <input type="checkbox"/>	
Other skills; list below	

Attach a copy of the applicants resume, if presented