



APPLICATION FOR EMPLOYMENT

Date _____

Name: (Last) _____ (First) _____ (Middle) _____	Telephone # _____
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Present Address _____	Apt. #: _____
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City _____	State _____	Zip Code _____
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PERIOD OF RESIDENCE _____ Years	EMAIL ADDRESS _____	ARE YOU UNDER THE AGE OF 18? <input type="checkbox"/> YES <input type="checkbox"/> NO
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PERSONAL DATA	JOB DATA
SOCIAL SECURITY NUMBER ____ - ____ - _____	POSITION DESIRED:
DRIVER'S LICENSE NUMBER _____ STATE _____ <small>(APPLICABLE IF POSITION DESIRED REQUIRES)</small>	OTHER POSITIONS YOU QUALIFY FOR:

Are you a citizen or national of the United States or an alien authorized to work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO	SALARY DESIRED _____	MINIMUM SALARY YOU WILL ACCEPT _____
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Have you ever been arrested, charged or convicted of a felony or misdemeanor? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, explain each incident fully, giving dates Background checks may be performed	IF PART TIME, CIRCLE DAYS OF WEEK AVAILABLE: MON TUES WED THURS FRI Hours Available: From _____ am/pm To _____ am/pm
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Are you a Licensed Journeyman? <input type="checkbox"/> YES <input type="checkbox"/> NO If Yes, are you active? <input type="checkbox"/> YES <input type="checkbox"/> NO License # _____ County _____	REFERRED BY: <input type="checkbox"/> Employee <input type="checkbox"/> Agency <input type="checkbox"/> Self <input type="checkbox"/> Ad <input type="checkbox"/> Other _____
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IT IS THE POLICY OF TADDEO ELECTRICAL CONTRACTORS, INC. THAT ALL EMPLOYEES AND APPLICANTS FOR EMPLOYMENT ARE AFFORDED EQUAL OPPORTUNITY WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, RELIGION, SEX, AGE, DISABILITY, MARITAL STATUS OR SEXUAL ORIENTATION.

**LIST BELOW ALL PRESENT AND PAST EMPLOYMENT
BEGINNING WITH YOUR MOST RECENT JOB.**

NOTE: IF YOU WERE EMPLOYED UNDER ANOTHER NAME, PLEASE INDICATE IT IN THE APPROPRIATE SPACE, IT WILL FACILITATE OUR CHECKING REFERENCES.

COMPANY	ADDRESS	CITY AND STATE	ZIP CODE
TYPE OF BUSINESS			

NAME YOU USED AS EMPLOYEE	YOUR JOB TITLE	# HRS/WK	NAME OF SUPERVISOR	AREA CODE & PHONE#
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DATES: FROM MONTH/YEAR	TO: MONTH/YEAR	DESCRIBE BRIEFLY TYPE OF WORK PERFORMED
STARTING SALARY \$ WEEK	FINAL SALARY \$ WEEK	REASON FOR LEAVING (EXPLAIN)

IF PRESENTLY EMPLOYED, HOW MUCH NOTICE OF RESIGNATION WOULD YOU NEED TO GIVE?
(CIRCLE ONE) **1 2 3 4 WEEKS**



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TYPE OF BUSINESS			

NAME YOU USED AS EMPLOYEE	YOUR JOB TITLE	# HRS/WK	NAME OF SUPERVISOR	AREA CODE & PHONE#
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DATES: FROM MONTH/YEAR	TO: MONTH/YEAR	DESCRIBE BRIEFLY TYPE OF WORK PERFORMED
STARTING SALARY \$ WEEK	FINAL SALARY \$ WEEK	REASON FOR LEAVING (EXPLAIN)

RECORD OF EDUCATION

Circle Highest Grade Completed In Each Category	High School 9 10 11 12	College 1 2 3 4	Graduate School 1 2 3 4	Total College Credits Earned: _____	
	Name of School	Address	Course-Degree (Major)	Dates Attended	Did You Graduate?
High School					
College (Undergraduate)					
Graduate School					
Other Training (Apprentice, Business or Vocational School)					

MILITARY SERVICE IN U.S.A.

BRANCH OF SERVICE:	FINAL RANK:	SERVICE NUMBER:
SERVICE SCHOOL OR SPECIAL EXPERIENCE GAINED IN THE MILITARY SERVICE RELATED TO POSITION APPLIED FOR:		

Are you able to perform all of the essential functions of the job? YES NO

If not, please explain which function(s) cannot be performed and why?

I UNDERSTAND THAT:

1. ANY MISREPRESENTATION OR OMISSION OF FACTS ON THIS APPLICATION OR DURING THE INTERVIEW SHALL BE SUFFICIENT CAUSE FOR REJECTION OF THIS APPLICATION, OR DISMISSAL IF I AM EMPLOYED.
2. EMPLOYMENT IS SUBJECT TO SATISFACTORY COMPLETION OF AN ORIENTATION PERIOD.
3. EMPLOYMENT IS AT WILL. I UNDERSTAND THAT MY EMPLOYMENT AND COMPENSATION IS FOR NO DEFINITE PERIOD AND MAY BE TERMINATED BY ME OR THE COMPANY, WITH OR WITHOUT CAUSE, AND WITHOUT ANY PREVIOUS NOTICE.

I AUTHORIZE TADDEO ELECTRICAL CONTRACTORS, INC., TO VERIFY:

- ALL INFORMATION GIVEN
 - ALL INFORMATION EXCEPT PRESENT EMPLOYER

Signature Of Applicant: _____ Date: _____