

SHELLEY'S ELECTRICAL SERVICE, INC.

COMMERCIAL/INDUSTRIAL SINCE 1963

102 Wolverton Lane, P.O. Box 85 Sebastopol MS 39359

PH. (601)625-8229 FAX: (601)625-8272

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EMPLOYMENT APPLICATION

APPLICANT INFORMATION

FULL NAME: _____ DATE: _____

LAST

FIRST

M.I.

ADDRESS: _____

STREET ADDRESS

APARTMENT/UNIT #

CITY

STATE

ZIP CODE

PHONE: (____) _____ SOCIAL SECURITY NO.: _____ DOB: _____

DATE AVAILABLE: ____/____/____ WHAT IS YOUR DESIRED SALARY RANGE: _____

POSITION APPLIED FOR: _____

ARE YOU AVAILABLE TO WORK: ____ FULL TIME ____ PART TIME ____ TEMPORARY

CAN YOU TRAVEL IF A JOB REQUIRES IT? ____ YES ____ NO CAN YOU WORK WEEKENDS? ____ YES ____ NO

BEST TIME TO CONTACT YOU AT HOME IS: _____: _____ A.M. / P.M.

IF YOU ARE UNDER 18, CAN YOU PROVIDE REQUIRED PROOF OF ELIGIBILITY TO WORK? ____ YES ____ NO

ARE YOU A CITIZEN OF THE UNITED STATES? ____ YES ____ NO

ARE YOU PREVENTED LAWFULLY BECOMING EMPLOYED IN THE COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? ____ YES ____ NO

PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT.

HAVE YOU EVER WORKED FOR THIS COMPANY? ____ YES ____ NO If so, when? _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? ____ YES ____ NO

IF YES, EXPLAIN _____

CONVICTION WILL NOT NECESSARILY DISQUALIFY AN APPLICANT FROM EMPLOYMENT.

ARE YOU NOW OR HAVE YOU EVER PARTICIPATED IN THE USE OF ILLEGAL DRUGS? ____ YES ____ NO

EDUCATION

HIGH SCHOOL: _____ ADDRESS: _____

FROM: _____ TO: _____ DID YOU GRADUATE: ____ YES ____ NO DEGREE: _____

COLLEGE: _____ ADDRESS: _____

FROM: _____ TO: _____ DID YOU GRADUATE: ____ YES ____ NO DEGREE: _____

MILITARY SERVICE

BRANCH: _____ FROM: _____ TO: _____

RANK AT DISCHARGE: _____ TYPE OF DISCHARGE: _____

IF OTHER THAN HONORABLE, EXPLAIN: _____

REFERENCES

PLEASE LIST THREE REFERENCES.

FULL NAME: _____ RELATIONSHIP: _____

COMPANY: _____ PHONE: ____ (____) _____

ADDRESS: _____

FULL NAME: _____ RELATIONSHIP: _____

COMPANY: _____ PHONE: ____ (____) _____

ADDRESS: _____

FULL NAME: _____ RELATIONSHIP: _____

COMPANY: _____ PHONE: ____ (____) _____

ADDRESS: _____

PREVIOUS EMPLOYMENT

EMPLOYER: _____ FROM: _____ TO: _____

ADDRESS: _____ PH. NO.: ____ (____) _____

CONTACT PERSON: _____ JOB TITLE: _____

STARTING SALARY: _____ ENDING SALARY: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ FROM: _____ TO: _____

ADDRESS: _____ PH. NO.: ____ (____) _____

CONTACT PERSON: _____ JOB TITLE: _____

STARTING SALARY: _____ ENDING SALARY: _____

REASON FOR LEAVING: _____

EMPLOYER: _____ FROM: _____ TO: _____

ADDRESS: _____ PH. NO.: ____ (____) _____

CONTACT PERSON: _____ JOB TITLE: _____

STARTING SALARY: _____ ENDING SALARY: _____

REASON FOR LEAVING: _____

Shelley's Electrical Service is an equal opportunity employer and does not discriminate on the basis of age, gender, race, disabilities or ethnicity. This organization is an employee at will employer. Reference checks and background checks may be conducted and the applicant may be subject to drug testing and physical examination prior to hiring. Random drug testing may be administered throughout employment.

DATE: _____

SIGNATURE OF APPLICANT

I CERTIFY THAT ANSWERS GIVE HEREIN ARE TRUE AND COMPLETE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION. IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN MAY RESULT IN DISCHARGE. I UNDERSTAND THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE EMPLOYER.