Atkinson Electric, Inc. Application for Employment

Name	Last	First	N	Middle		Maiden
Present address						
	Number	Street	City	State	Zip	
How long have you bee	en at your current address?	3				
Previous address						
	Numbe	r	Street		City State	Zip
Telephone ()		Alternate	Telephone	()	
Date of Birth		Soc	cial Security	No		
Position applying for?			Salary	desired	?	
Do you have an electric	cian's license? Yes	□ No			ear about us?	
If yes, type & number _		- 200 West 200 10 10 10 10 10 10 10 10 10 10 10 10 1			an about us:	119 yr x
How many hours can yo	ou work weekly?		Can y	ou work	Saturdays?	
Employment desired	□FULL-TIME ONLY	□PART-TIM	E ONLY	□FU	JLL- OR PART-	-TIME
Date available for work	?					
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	N		OF YEARS PLETED	MAJOR & DEGREE
High School						
College						
Bus. or Trade School						
Professional School						
8						
	nvicted of a felony? No					
f yes, please explain						
	h- A15	-	<u> </u>			
	he Armed Forces?					
	of the national guard?	W				
pecialty						

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□ Yes □ Yes Word □ Yes Typing □ No WPM 10-key □ No Processing □ No WPM Personal □ Yes PC □ Other Skills	Do you ha	ave a driver's	license?	□ Yes	□ No				
Expiration date	What is yo	our means of	transporta	ation to work	?				
Have you had any accidents during the past three years? How many?					State of issue .				
Please list two references other than relatives or previous employers. Name Name Name Position Company Address Address Address Telephone () Telephone () Telephone () Telephone for which you are applying. Please list any electrical tools that you own. Please fill out this section if you are applying for an office position. Yes	Expiration	date							
Please list two references other than relatives or previous employers. Name	Have you	had any acci	dents duri	ing the past t	hree years?		How	many?	
Name	Have you	had any mov	ing violati	ons during th	ie past three yea	ars?	How	Many?	
Name									
Position Position Company Address Address Address Position Position Address Address Please list any additional information necessary to describe your full qualifications for the specific position for which you are applying. Please list any electrical tools that you own. Please fill out this section if you are applying for an office position Yes			Pie	ase list two r	eferences other	than relatives or	previous emplo	yers.	
Company Address	Name					Name			
Address Address Telephone () Telephone ()	Position _					Position			
Telephone (Company	-			-	Company			
Telephone () Telephone () Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. Please list any electrical tools that you own. Please fill out this section if you are applying for an office position. Present of the specific position. Yes	Address _					Address			
Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. Please list any electrical tools that you own. Please fill out this section if you are applying for an office position. Yes Yes Yes Word Yes Typing No Processing No WPM Other Skills									
Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. Please list any electrical tools that you own. Please fill out this section if you are applying for an office position. Yes Yes Word Yes Typing No WPM 10-key No Processing No WPM Personal Yes Other Skills	Telephone	· ()				Telephone (_)		
☐ Yes ☐ Yes Word ☐ Yes Typing ☐ No WPM 10-key ☐ No Processing ☐ No WPM Personal ☐ Yes PC ☐ Other Skills WPM									
Personal		□ Yes	tion if you			□ Yes			WPM
			PC						
		□ No	Mac						

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Work Experience	Please list your work experience for the past five years beginning with your most recent job held. f you were self-employed, give firm name. Attach additional sheets if necessary.					
Name of employ Address	ver	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip (Code		From	Start		
Phone number			То	Final		
Reason for leavi	ing	Your last job title				
List the jobs you h	neld, duties performed, skills used or learned, advar	cements or promotions	while you worked at this	s company.		
May we contact	your present employer?	□ No		-		
Did you complet	e this application yourself	☐ No If not, who did	?			
Name of employ Address	er	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip C	Code		From	Start		
Phone number			То	Final		
Reason for leavi	ng	Your Last Job Title				
List the jobs you h	eld, duties performed, skills used or learned, advan	cements or promotions	while you worked at this	company.		
Name of employed	er	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip C	code		From	Start		
Phone number			То	Final		
Reason for leaving	ng	Your last job title				
List the jobs you he	eld, duties performed, skills used or learned, advan	cements or promotions	while you worked at this	company.		



AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Atkinson Electric, Inc creates an actual or implied contract of employment. I understand that, if I accept employment with Atkinson Electric, Inc. it will be on an at-will basis. This means that either Atkinson Electric, Inc or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by Atkinson Electric, Inc. I release Atkinson Electric, Inc and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize Atkinson Electric, Inc to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release Atkinson Electric, Inc and its employees from all liability arising from such investigation.

Signature of applicant	Date:
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Atkinson Electric, Inc is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Atkinson Electric, Inc. depends solely on your qualifications.