

Hourly wage: _____
Hire: Date: _____
Hired: By: _____



EMPLOYEE APPLICATION

DATE: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ SS# _____

DOB: _____

DO YOU HAVE ANY PREVIOUS JOB INJURIES? YES OR NO
IF YES EXPLAIN AND LIST DATE OF INJURY:

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR BEEN
INCARCERATED IN CONNECTION WITH A FELONY? YES OR NO
IF YES, PLEASE EXPLAIN.

REFERENCES:

1. NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

1. NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMPLOYMENT HISTORY

NAME OF COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____ CONTACT PERSON: _____

WAGES: _____ DATE OF EMPLOYMENT: _____

TITLE AND JOB DUTIES: _____

REASON FOR LEAVING: _____

NAME OF COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____ CONTACT PERSON: _____

WAGES: _____ DATE OF EMPLOYMENT: _____

TITLE AND JOB DUTIES: _____

REASON FOR LEAVING: _____

NAME OF COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____ CONTACT PERSON: _____

WAGES: _____ DATE OF EMPLOYMENT: _____

TITLE AND JOB DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYMENT HISTORY

NAME OF COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____ CONTACT PERSON: _____

WAGES: _____ DATE OF EMPLOYMENT: _____

TITLE AND JOB DUTIES: _____

REASON FOR LEAVING: _____

NAME OF COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____ CONTACT PERSON: _____

WAGES: _____ DATE OF EMPLOYMENT: _____

TITLE AND JOB DUTIES: _____

REASON FOR LEAVING: _____

NAME OF COMPANY: _____

ADDRESS: _____

PHONE NUMBER: _____ CONTACT PERSON: _____

WAGES: _____ DATE OF EMPLOYMENT: _____

TITLE AND JOB DUTIES: _____

REASON FOR LEAVING: _____

JOB CERTIFICATIONS/ TRAINING/ SCHOOLS

TYPE: CERTIFICATION _____

CERTIFIED BY: _____

DATE: _____

TYPE: CERTIFICATION _____

CERTIFIED BY: _____

DATE: _____

TRADE REFERENCES:

NAME: _____

NUMBER: _____

TRADE REFERENCES:

NAME: _____

NUMBER: _____

TRADE REFERENCES:

NAME: _____

NUMBER: _____

EDUCATION

DID YOU GRADUATE?

YES

OR

NO

IF YES, WHEN: _____

FROM WHAT SCHOOL: _____

DID YOU ATTEND COLLEGE? YES OR NO

IF YES, WHAT COLLEGE: _____

DID YOU ATTEND ANY TRADE RELATED SCHOOLS? YES OR NO

WHAT SCHOOL? _____

LIST ANY SPECIAL SKILLS.

1.) _____

2.) _____

3.) _____

4.) _____

5.) _____

I certify that the information provided in my application for employment with Sun Coast Electric is true and complete to the best of my knowledge. I authorize the investigation of all matters contained in this application and hereby give Sun Coast Electric permission to contact schools, previous employers, references, and others. I hereby release the Employer from any liability as the result of such contact. I understand that misrepresentations, omissions of fact or incomplete information provided on my application or resume may remove me from further consideration for employment. In addition, if I am employed, I understand that any misrepresentation or omissions of fact on my application or resume may subject me to discipline, up to and including discharge, at any time without any previous notice.

Applicant Signature: _____

Applicant Name (please print): _____

Date: _____