



ELECTRIC SUPPLY & EQUIPMENT CO.

ELECTRIC SUPPLY & EQUIP. CO.

Application for Employment

Equal Opportunity Employer

PERSONAL INFORMATION

NAME

Last

Middle

First

ADDRESS

Street

City

State

Zip

HOME PHONE

WORK PHONE

SOCIAL SECURITY NUMBER

/ /

POSITION FOR WHICH YOU ARE APPLYING

AVAILABILITY: FULL TIME PART TIME

DATE AVAILABLE TO START / /

ARE YOU UNDER AGE 18? YES NO HAVE YOU APPLIED HERE BEFORE? YES NO WHEN? / /

REFERRED BY: NEWSPAPER AGENCY FRIEND/RELATIVE OTHER:

DO YOU HAVE ANY FRIENDS/RELATIVES WORKING HERE? YES NO NAME:

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

A conviction does not automatically exclude you from consideration for employment.

EDUCATION

HIGHEST LEVEL COMPLETED: GRADES 9 10 11 12 YRS COLLEGE 1 2 3 4 MAJOR/DEGREE

HIGH SCHOOL NAME & LOCATION

COLLEGE NAME & LOCATION

POST GRADUATE DEGREES

SCHOLASTIC HONORS & PROFESSIONAL ORGANIZATIONS

OTHER TRAINING OR CERTIFICATION THAT CONTRIBUTES TO YOUR QUALIFICATIONS

EXPERIENCE

Please list your last three employers, beginning with the most recent. You may submit a résumé to *supplement* information given.

EMPLOYER NAME

ADDRESS

PHONE

SUPERVISOR

REASON FOR LEAVING

DATES EMPLOYED

to

FINAL POSITION

FINAL SALARY \$

per

DUTIES

EMPLOYER NAME

ADDRESS

PHONE

SUPERVISOR

REASON FOR LEAVING

DATES EMPLOYED

to

FINAL POSITION

FINAL SALARY \$

per

DUTIES

EMPLOYER NAME

ADDRESS

PHONE

SUPERVISOR

REASON FOR LEAVING

DATES EMPLOYED

to

FINAL POSITION

FINAL SALARY \$

per

DUTIES

TYPES OF EQUIPMENT AND SOFTWARE WITH WHICH YOU ARE PROFICIENT

Please provide three references that we can contact and who are able to evaluate your professional knowledge and abilities:

NAME	PHONE
TITLE	COMPANY
ADDRESS	

NAME	PHONE
TITLE	COMPANY
ADDRESS	

NAME	PHONE
TITLE	COMPANY
ADDRESS	

CERTIFICATION	<i>Read carefully before signing.</i>
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I certify that the information I have provided on this Application for Employment is true and complete. I understand and agree that employment with this company, if offered, may be immediately discontinued if misrepresentation, false statements or material omissions are found to have been made. I hereby authorize educational institutions; former employers and former supervisors to provide any and all information pertinent to my being considered for employment and hereby release those providing such information from any liability for doing so. I understand that employment, if offered, is contingent upon my providing additional information for employee record purposes and also upon my providing proof of identity and employment eligibility and completing a Form I-9. I understand that, if employed, the company or I may terminate the employment relationship at any time, with or without cause, with or without notice, and that, if employed, employment does not constitute a contract of employment between the company and myself. If employed, I will abide by and conform to all company policies, rules and procedures as may be in effect from time to time. I have read the above, understand its content and meaning, and agree to all of its provisions.

APPLICANT'S SIGNATURE	DATE
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