



**EMPLOYMENT
APPLICATION FORM**

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5. Date: _____

Name: _____

Last First Middle Maiden

Present Address: _____

Number Street City State Zip

How Long: _____

Telephone: _____

If under 18, please list age: _____

Position Applied For: _____ Days/Hours Available to Work:

Salary Desired: _____ No Pref _____ Thur _____
Mon _____ Fri _____

_____ Tue _____ Sat _____
Wed _____ Sun _____

How many hours can you work weekly? _____ Can you work nights? _____

Employment Desired: FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

When available for work? _____

EDUCATION & OTHER INFORMATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NO. OF YEARS COMPLETED	MAJOR & DEGREE
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High School

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College

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Bus. or Trade School

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Professional School

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Have you ever been convicted of a crime? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Do you have a driver's license? Yes No

What is your means of transportation to work?

Driver's License Number: _____ State of issue: _____
 Operator Commercial (CDL) Chauffeur

Expiration Date: _____

Have you had any accidents during the past three years?	How many?
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Have you had any moving violations during the past three years?	How Many?
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OFFICE ONLY

Typing Yes No _____ WPM 10-key Yes No Word Processing Yes No _____ WPM

Personal Computer <input type="checkbox"/> Yes <input type="checkbox"/> No	PC <input type="checkbox"/> Mac <input type="checkbox"/>	Other Skills:
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Please list two references other than relatives or previous employers.

Name:	Name:
Position:	Position:
Company:	Company:
Address:	Address:
Telephone:	Telephone:
Office Notes:	Office Notes:



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An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to add any additional information necessary to describe your full qualifications for the specific position for which you are applying.

MILITARY

Have you ever been in the armed forces? Yes No

Are you now a member of the national guard? Yes No

Specialty	Date Entered	Discharge Date
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Work Experience	Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.
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Job One

Name of Employer:	Name of Last Supervisor	Employment Dates	Salary
Complete Address:		From:	Start:
		To:	Final:
Phone Number:	Your Last Job Title:		

Reason for Leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.



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Job Two			
Name of Employer:	Name of Last Supervisor:	Employment Dates	Salary
Complete Address:		From:	Start:
		To:	Final:
Phone Number:	Your Last Job Title:		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Job Three			
Name of Employer:	Name of Last Supervisor:	Employment Dates	Salary
Complete Address:		From:	Start:
		To:	Final:
Phone Number:	Your Last Job Title:		
Reason for Leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact your present employer?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
Did you complete this application yourself?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
If not, who did?			



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PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by LANGE PLUMBING (hereinafter called "the Company"), I agree that:

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, I authorize the references I have listed to disclose to the Company all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that nothing contained in the application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between the Company and me. In addition, I understand and agree that if I am employed, my employment is at will and is for no definite or determinable period and may be terminated at any time, with or without prior notice, or with or without cause, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company's designated representative.

I understand that in connection with my application for employment, the Company may obtain a consumer report and/or investigate consumer reports about me that may contain information as to my character, general reputation, personal characteristics, and mode of living. Such reports may include or consist of my driving history obtained from the Department of Motor Vehicles. I further understand that any job offer extended by the Company is contingent upon receipt of a favorable consumer or investigative consumer report about me.

I understand that in connection with my application for employment, depending upon the position for which I have applied, any offer of employment is conditioned upon my taking and passing a post-offer/pre-employment drug test. I understand that I may refuse to take any required pre-employment drug test, but that if I do, any offer of employment will be immediately withdrawn.

I understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

**I HAVE READ THE ABOVE PARAGRAPHS, UNDERSTAND THEIR IMPORTANCE AND EFFECT
UPON MY EMPLOYMENT, AND ACCEPT SAME AS CONDITIONS OF MY EMPLOYMENT WITH
THE COMPANY.**

This application, when completed and signed, becomes the property of Company.

Signature of Applicant

Date:

This Company 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 this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.