

## EMPLOYMENT APPLICATION

### PERSONAL INFORMATION

NAME \_\_\_\_\_ DOB \_\_\_\_\_  
First Middle Last  
 ADDRESS \_\_\_\_\_  
Street City State Zip Code  
 SOCIAL SECURITY NUMBER \_\_\_\_\_ Are you 18 years or older?  YES  NO  
 PHONE # \_\_\_\_\_ CELL PHONE # \_\_\_\_\_

Are you legally able to work in the U.S.A.?  YES  NO

Salary / HR \$ \_\_\_\_\_ Do you have a current VALID driver's license?  YES  NO if yes DL#/State \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony?  YES  NO. Convictions may not stop you from being eligible for hire. Please describe any convictions: \_\_\_\_\_

Have you signed a non-compete agreement or employment contract in the past year or so?  YES  NO. If yes, describe: \_\_\_\_\_

### EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_

I desire to work:  FULL-TIME  PART-TIME  TEMPORARY

I PREFER to work what shift(s)?  DAY SHIFT  EVENING SHIFT  NIGHT SHIFT  ANY SHIFT

What hours can you work? MONDAY \_\_\_\_\_ TUESDAY \_\_\_\_\_ WEDNESDAY \_\_\_\_\_  
From - To From - To From - To

THURSDAY \_\_\_\_\_ FRIDAY \_\_\_\_\_ SATURDAY \_\_\_\_\_ SUNDAY \_\_\_\_\_  
From - To From - To From - To From - To

Are you employed now?  YES  NO. If yes, may we inquire of your current employer?  YES  NO

Do you plan to work another job? If yes, what hours? \_\_\_\_\_

### TRANSPORTATION

I have reliable transportation to: (check all that apply)

- I have a car / truck to get to work
- Just those close to a bus stop / other public transportation
- Just those close to my residence
- Just those where a friend or family could drop me off
- It matters based on the shift I work
- I do not have reliable transportation - I walk to work
- I don't know

### JOB REQUIREMENTS

Have you ever worked for a company in our industry before?  YES  NO. If yes, when? \_\_\_\_\_

What Company? \_\_\_\_\_ What State? \_\_\_\_\_

EDUCATION	NAME OF SCHOOL	LOCATION	# YEARS	GRAD?	DEGREE NAME
GRAMMAR SCHOOL					
HIGH SCHOOL					
COLLEGE					
Trade, business or other school					

In case of Emergency:

Contact: \_\_\_\_\_

Phone # \_\_\_\_\_

**Wells Mechanical Services LLC Job Application**

**Direct Deposit:** ( ) Yes ( ) No. If yes we will need a voided check.

**References:**

Name: \_\_\_\_\_  
Phone# \_\_\_\_\_

Name: \_\_\_\_\_  
Phone# \_\_\_\_\_

I CERTIFY THAT THE FACTS CONTAINED IN THE APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT , IF EMPLOYED, FALSIFIED STATEMENTS ON THE APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY MAY BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE OR CAUSE.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_