



## APPLICATION FOR EMPLOYMENT COMMERCIAL ELECTRICIAN

Date \_\_\_\_\_

\_\_\_\_\_  
Last Name                      First                      Middle

\_\_\_\_\_  
Address                      City                      State                      Zip Code

(    )                      (    )  
\_\_\_\_\_  
Telephone Number                      Message Number

CERTIFICATION # \_\_\_\_\_

### DRUG TESTING WILL BE MANDATORY

#### GENERAL

Upon request can you provide proof that you are authorized to work in the United States?  Yes  No

Are you over 18 years of age?  Yes  No  
(If under 18, hire is subject to verification that you are of minimum legal age.)

Date available for employment: \_\_\_\_\_

Have you ever worked for us?  Yes  No

If so, when: \_\_\_\_\_

Have you applied for work with us before?  Yes  No

If so, when: \_\_\_\_\_

Specify any hours or days you cannot or will not work: \_\_\_\_\_

Are you willing to work overtime if needed:  Yes  No

If currently employed, may we contact your present employer:  Yes  No

## EMPLOYMENT HISTORY

(Start with your most recent position, use additional sheet if necessary. Do not omit any employers.)

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ ( )  
Telephone Number

Date started: \_\_\_\_\_ Stopped: \_\_\_\_\_

Starting position: \_\_\_\_\_ Salary: \_\_\_\_\_ hr/mo.

Job title: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Brief description or your responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_

Address: \_\_\_\_\_ ( )  
Telephone Number

Date started: \_\_\_\_\_ Stopped: \_\_\_\_\_

Starting position: \_\_\_\_\_ Salary: \_\_\_\_\_ hr/mo.

Job title: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Brief description or your responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_

Address: \_\_\_\_\_ ( )  
Telephone Number

Date started: \_\_\_\_\_ Stopped: \_\_\_\_\_

Starting position: \_\_\_\_\_ Salary: \_\_\_\_\_ hr/mo.

Job title: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Brief description or your responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**OTHER RELEVANT BACKGROUND:**

If you are currently employed under a written contract with any company, and that contract restricts you in any way in working for a competitor, please specify the restrictions.

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Con J. Franke Electric, Inc. may request a copy of the relevant sections of the contract.

**WORK REFERENCES:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone number: ( ) \_\_\_\_\_ Occupation: \_\_\_\_\_

Years Known: \_\_\_\_\_

How Known: \_\_\_\_\_

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Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone number: ( ) \_\_\_\_\_ Occupation: \_\_\_\_\_

Years Known: \_\_\_\_\_

How Known: \_\_\_\_\_

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Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone number: ( ) \_\_\_\_\_ Occupation: \_\_\_\_\_

Years Known: \_\_\_\_\_

How Known: \_\_\_\_\_

**OTHER:**

Besides the crime of possession of less than an ounce of Marijuana for personal use more than two years ago, have you ever been convicted of any crime?  Yes  No

Describe nature of the crime(s), when and where convicted and disposition of the case: \_\_\_\_\_

\_\_\_\_\_

(A conviction will not necessarily disqualify an applicant for the job applied for. The nature of the offense, the date of the

Have you ever committed a crime?  Yes  No

Describe: \_\_\_\_\_

\_\_\_\_\_

Are you currently under arrest pending trial?  Yes  No

If yes, describe how it will affect your availability for work, if at all: \_\_\_\_\_

\_\_\_\_\_

Have you ever stolen property or money from a former employer:  Yes  No

Describe: \_\_\_\_\_

\_\_\_\_\_

Have you ever damaged a former employer's property?  Yes  No

Describe: \_\_\_\_\_

\_\_\_\_\_

Do you carry a weapon on your person?  Yes  No

If yes, do you have a permit to carry the weapon?  Yes  No

**PLEASE CAREFULLY READ THE FOLLOWING STATEMENT BEFORE SIGNING:**

I hereby certify that all information contained in this application is true and correct to the best of my knowledge. I further certify that I have not knowingly withheld any information that may adversely affect my chances for employment. I understand that any error or omission of information may result in denial of employment or termination at any time. I authorize all my current and former employers and their employees, past or present, to give Con J. Franke Electric, Inc. any and all information concerning my employment history and any pertinent information they may have, personal or otherwise. I also authorize all the references that I have provided to give any information to Con J. Franke Electric, Inc. that they consider relevant. I waive all privacy interests in such information.

I further release all the sources referenced above (and all their employees, officers, directors and agents) and Con J. Franke Electric, Inc. (and its employees, officers, directors and agents) of all claims and liability for any damages resulting from their furnishing any information, whether I agree or disagree with the content of the disclosed information. Thus, I understand that if any one of the above sources discloses information that I believe to be erroneous, I cannot bring any legal action against that source or Con J. Franke Electric, Inc. regarding the disclosure of the information. In this regard, I waive any and all benefits associated with California Civil Code Section 1542, which provides:

"General Release Claims Extinguished. A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor."

If employed, I understand that my employment can be terminated with or without cause, at any time, and for any reason, or no reason, at the option of either the Company or myself. I understand that no one, other than the Chairman of the Board/CEO of Con J. Franke Electric, Inc. has any authority to enter into an agreement for employment for a specified period of time, or to make any agreement contrary to the foregoing. Any agreement entered into by the President can only be made in writing signed by him/her and the employee.

I understand that the issuance of this Application does no indicate that there are any positions open.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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We comply with the requirements of the Americans with Disabilities Act. If you feel that you require a reasonable accommodation at any step of the interview/application process please notify us within a reasonable time. We may request that you support your request with medical documentation.

It is our policy and intent to provide equal opportunity to all persons without regard to race, color , religion, political affiliation, sex, pregnancy, marital status, sexual orientation, age, ancestry, national origin, disability, medical condition, or genetic characteristics as defined in state and federal laws. This policy covers all facets of employment including, but not limited to: recruitment, selection, placement, promotions, transfers, demotions, terminations, training, compensation and all aspects of employment.