



APPLICATION FOR EMPLOYMENT
(Equal Opportunity Employer)

General

Name: _____

Address: _____

Telephone: _____ Social Security # _____

Date available for employment: _____

Have you ever been employed by this company? _____

Are you employed now? _____ If so, may we contact your present employer? _____

Do you have a valid driver's license for the State of Oregon? _____ License # _____

Are you available to work full time? _____ part time? _____ overtime? _____

Apprentice? If so, what period? _____ Journeyman Plumber? _____

Education

High School:	City/ State:	Year Completed:
College:	City/State:	Year Completed:
Trade School:	City/ State:	Year Completed:
Other:	City/State:	Year Completed:

Skills

Please list all skills, qualifications and considerations or other activities related to the job you are seeking:

This company is an equal opportunity employer. All applicants will be considered without regard to age, race, national origin, religion, disability, sex or other protected status in accordance with applicable federal and state equal opportunity laws. This company will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of the job.

Employment Experience

#1 Employer: _____

Address: _____

Telepone # _____ Supervisor: _____

Job Position: _____ Employed From: _____ (mo/yr) to: _____ (mo/yr)

Duties: _____

Reason for leaving: _____

#2 Employer: _____

Address: _____

Telepone # _____ Supervisor: _____

Job Position: _____ Employed From: _____ (mo/yr) to: _____ (mo/yr)

Duties: _____

Reason for leaving: _____

#3 Employer: _____

Address: _____

Telepone # _____ Supervisor: _____

Job Position: _____ Employed From: _____ (mo/yr) to: _____ (mo/yr)

Duties: _____

Reason for leaving: _____

References

Please list three non-relatatives who are familiar with your qualifications, work history and ability:

Name	Occupation	Years Known	Telepone #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary material(s)) are true and complete without omissions. By signing below, I authorize II-S Mechanical, Inc. to investigate all statements contained in this employment application as they deem necessary in arriving at an employment decision. I understand that any false information provided by me will likely result in a refusal to hire or immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

If hired I will be responsible for familiarizing myself with all rules and regulations of II-S Mechanical, Inc as they presently exist or are later modified. If hired, I understand my employment can be terminated at the discretion of II-S Mechanical, Inc or at my option, without notice, at any time and for any reason.

I also understand that no representative of II-S Mechanical, Inc has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the President of II-S Mechanical, Inc.

I understand this application is not an offer of employment and no promises or representatives of employment have been made to me at this time.

I have read, understand and agree to the above.

Signature of Applicant

Date

This application is valid for ninety (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from the date signed, I will submit a new application.