

SOLOMON'S AIR CONDITIONING & APPLIANCES, INC.

PRE-EMPLOYMENT APPLICATION

Equal Opportunity Employer

We greatly appreciate your interest in our organization and assure you that applicants are considered for all positions without regard to race, color, sex, age, religion, national origin, and disability, marital or veteran status. Please note this application must be completed in its entirety and signed in order to be considered information submitted on this application is subject to verification. NOTE: all new hires are required to submit documentation in accordance with the immigration Reform and Control Act of 1986. All employees may be required to submit to drug/alcohol testing both prior to their first day of employment and during the scope of their employment.

PERSONAL INFORMATION:

Date _____

Name: _____ Social Security # _____
 Last First Mi

Drivers License: _____ Date Of Birth _____

Present Address: _____
 Street City State zip

How long have you lived at this address? _____ Phone #: _____

Previous Address: 1 _____
 2 _____

How long did you live there? 1 _____ 2 _____

Are you 18yrs of age? Yes__ No__ Are you legally eligible for employee in the USA? yes__ no__

EMPLOYMENT INFORMATION

Position applying for: _____ Date available: _____

Type of employment desired: full time ___ part time ___ Salary desired: \$ _____ per hr

Are you willing to work overtime, if required: yes ___ No ___

Have you ever been convicted of any crime other than a minor traffic violation? Yes ___ No ___

If yes, state date and places where charges occurred _____

Explain charges _____

Have you taken any illegal drugs in the past thirty days (30)? Yes ___ No ___

Are you presently employed? Yes ___ No ___ if yes, may we contact your employer? Yes ___ No ___

EDUCATION

HIGH SCHOOL:	YEARS:	GRADUATE
COLLEGE:		
TRADE:		

List any extracurricular activities, awards, scholarships _____

EMPLOYMENT EXPERIENCE

Company Name:	Telephone:	
Supervisor :	Employed from:	To:
Responsibilities:	Salary Start:	Finish:
Reason for Separation:		
Company Name:	Telephone:	
Supervisor :	Employed from:	To:
Responsibilities:	Salary Start:	Finish:
Reason for Separation:		
Company Name:	Telephone:	
Supervisor :	Employed from:	To:
Responsibilities:	Salary Start:	Finish:
Reason for Separation:		

NOTE that all the employers listed above will be contacted unless the applicant indicates differently. Are there any employers above whom you do not wish for us to contact? Yes _____ No _____

If yes, please indicate employer and reason: _____

REFERENCES

List below the names of three persons, not related to you, whom you have known for at least one year.

Name	ADDRESS	TELEPHONE	YEARS ACQ.

I hereby reaffirm that I have read the foregoing questions and that my answers to them are true and correct and that I have not misrepresented or withheld any information. I understand that falsification of this information may be cause for immediate dismissal. I further acknowledge that my employment may be terminated, and any offer of employment may be withdrawn without prior notice at any time by the company or me. I also understand that my employment is at will. This means that I am free to terminate my employment at any time, for any reason, and the company retains the same right. I understand that any offer of employment may be contingent upon a credit and criminal background investigation and a pre-employment drug screen. I hereby authorize all references and former employers listed on my employment application to give the company any and all information concerning my previous employment and any pertinent information they might have, personal or otherwise. I hereby release all parties, including agents, from any claims, causes of action, or liability from damages that may or could result from furnishing such information to the company or as a result of information obtained through a background investigation or drug screen.

Signature of Applicant: _____ Date: _____