## ANCHOR ELECTRIC OF FLORIDA EC13010351

APPLICATION FOR EMPLOYMENT

Date \_\_\_\_\_

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name				
Last	Firs	st	Middle	Maiden
Present address				
Street		City	State	Zip
How long at present address		,		
Telephone ()	Cellular (	)	E-mail address	
Position applied for			Desired hourly range _	
REFERRAL SOURCE (please check the	ne appropriate categ	ory and name	the source)	
□ Walk-in			Company's Website	
🛮 Employee		0	Internet	
Advertisement		0	Other	
If under 18, please list age		If required, c	an you furnish a work permit? 🛚 \	Yes 🛮 No
Date available for work		Are you leg	ally eligible for employment in t	nis country? 🛮 Yes 🖟 No
Have you submitted an application h	ere before? 🛮 Yes 🖺 N	lo		
Employment desired: Full-time C	Only Temporary	Seasonal		
Will you travel if job requires it? Ye jobs.) What is your willingness to tra			ential to need you to travel out o aughout state Out of	
Will you relocate if job requires it? `				
Have you ever pled "guilty" or "no co		nvicted of a cr	ime? Yes No	
If yes, please provide date(s) and de	tails			

Name of Employer	<u> </u>	mation)				
	Name of last	Employment	Pay or salary			
Address	supervisor dates					
City, State, Zip		From	Start			
Telephone Number		То	Final			
	Your last job title					
Reason for leaving (be specific)						
List the jobs you held, duties performed, skills used or le	earned, advancements or promotions	wnile you worked at	tnis company.			
Name of Employer Address	Name of last supervisor	Employment dates	Pay or salary			
City, State, Zip		From	Start			
Telephone Number		То	Final			
	Your last job title					
List the jobs you held, duties performed, skills used or le	variety, advancements of promotions	write you worked at	tilis company.			
	Name of last supervisor	Employment dates	Pay or salary			
Address			Pay or salary Start			
Address City, State, Zip		dates				
Address City, State, Zip		from	Start			
Name of Employer Address City, State, Zip Telephone Number  Reason for leaving (be specific)	supervisor	dates	Start			

Name of Employer		Name of last supervisor	Employment dates	Pay or salary		
Address			datoo			
City, State, Zip			From	Start		
Telephone Number			То	Finish		
		Your last job title				
Reason for leaving (be specific)						
List the jobs you held, duties performed, skills u	ısed or learned, advan	cements or promotions wl	nile you worked at	this company.		
Explain any gaps in your employment, other tha	ın those due to person	al illness, injury or disabili	ty			
If not addressed on previous page, have you ever been fired or asked to resign from a job?   \[ \begin{array}{c} \text{Yes} & \begin{array}{c} \text{No} \end{array} \]						
If yes, please explain						
SKILLS AND QUALIFICATIONS						
Summarize any special training, skills, licenses			ning the position f	or which you are		
applying						
ELECTRICAL SKILLS: (check appropriate boxes.	 . Include years of expe	 erience)				
Residential ~ Years:	New Construction -					
Tresidential Frears.	I New Construction	Τεαισ				
□ New Home (Rough in) ~ Years:	Other	Years:	_			
□ New Home (Trim) ~ Years:	☐ Other	Years:	_			
☐ Commercial ~ Years:	☐ Other	Years:	_			

EDUCATIONAL BACKGROUND (Starting w	ith your mo	ost recent sch	nool atten	ided, provide the follo	wing i	nformation)	
School (include City and S	tate)	Years Completed	(Please lis	Completed t any certificate and/or licen may have earned)	se you	GPA Class Rank	Major/Minor
<u> </u>							
REFERENCES: List name and telephone nur						-	e <i>not</i>
previous supervisors. If not applicable, list th	ree school		eferences		1		, , , , , , , , , , , , , , , , , , ,
Name		Title		Relationship to you		Telephone	# of Years Known
RELATED INFORMATION							
To what job-related organizations (professional, tra origin, citizenship, age, mental or physi	ade, etc.) do	you belong? Ex	clude men	nberships that would reve	eal rac	e, color, religio	n, sex, national
	- Cui disabilili	es, vererunyres	erve nation	Office			
Organization				Office	s neu	<u>u</u>	
List special accomplishments, publications, a citizenship, age, mental or physical disabilities, veto							
ciazensinp, age, mentai or physical aisabiliaes, vea		. Hational guar		iner similarly protected s	tutus.		
In your current or a prior job, have you ever w	ritten instr	ructions or dir	ections to	be followed by empl	oyees	or customer	s?
☐ Yes ☐ No ☐ Not Applicable If yes, ple	ase explair	n					
Is there any other job-related information yo	ou want us	s to know abo	out you? .				

## APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me. I understand that this employer does not unlawfully discriminate in employment and no questions on this application issued for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law. I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application. I understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPL all terms of the foregoing Applicant Statement.	ICANT STATEMENT. I certify that I have read, fully understand and accept
Signature of Applicant	Date

This Company is an equal 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 Anchor Electric of Florida.