ELITE
FIREPLACE & DRYER VENT SERVICES LLC

APPLICATION FOR **EMPLOYMENT**

PLEASE PRINT

APPLICANT INFORMATION

FIRST NAME	LAST NAME		DATE
ADDRESS		CITY	STATE & ZIP
HOME PHONE	CELL PHONE	EMAIL ADDRESS	POSITION APPLYING FOR

PERSONAL INFORMATION

HAVE YOU EVER APPLIED FOR OR WORKED FOR THIS COMPANY?
☐ Yes ☐ No If yes, when? _____

DO YOU HAVE ANY FRIENDS OR RELATIVES WORKING FOR THIS COMPANY? ☐ Yes ☐ No If yes, state name(s) and relationship:

Name: _____ Relationship:_____

Name: _____ Relationship:_____

IF HIRED WOULD YOU HAVE A RELIABLE MEANS OF TRANSPORTATION? ☐ Yes ☐ No

DO YOU HAVE A VALID CALIFORNIA DRIVERS LICENSE *(For driving positions only)*? ☐ Yes ☐ No

ARE YOU AT LEAST 18 YEARS OF AGE? ☐ *Yes* ☐ *No*
If under 18, hire is subject to verification that you are of minimum legal age.

IF HIRED, CAN YOU PRESENT EVIDENCE OF YOUR U.S. CITIZENSHIP OR PROOF OF YOUR LEGAL RIGHT TO LIVE AND WORK IN THIS COUNTRY? ☐ Yes ☐ No

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING, EITHER WITH OR WITHOUT REASONABLE ACCOMMODATIONS? *(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)*

☐ Yes ☐ No If no, describe the functions that cannot be performed.

ON WHAT DAY WOULD YOU BE AVAILABLE TO START WORK?

DO YOU HAVE ANY SCHEDULE LIMITATIONS?
☐ Yes ☐ No If yes, please specify times you are not able to work in the chart below.
☐ Yes ☐ No Will you work overtime if required?

DAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AM							
PM							

EDUCATION/TRAINING

	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE/BUS. SCHOOL				

EMPLOYMENT HISTORY

Please complete for all full-time or part-time employment **beginning with most recent employer**. All applicants should include active military assignments and voluntary employment and provide (10) years of history. You may explain any gaps in your employment.

MOST RECENT EMPLOYER	COMPANY NAME	PHONE	NAME OF SUPERVISOR	MAY WE CONTACT SUPERVISOR? ☐ Yes ☐ No
	ADDRESS		CITY	STATE & ZIP
	DATES EMPLOYED FROM: TO:	JOB TITLE		
	REASON FOR LEAVING			
2ND EMPLOYER	COMPANY NAME	PHONE	NAME OF SUPERVISOR	MAY WE CONTACT SUPERVISOR? ☐ Yes ☐ No
	ADDRESS		CITY	STATE & ZIP
	DATES EMPLOYED FROM: TO:	JOB TITLE		
	REASON FOR LEAVING			
3RD EMPLOYER	COMPANY NAME	PHONE	NAME OF SUPERVISOR	MAY WE CONTACT SUPERVISOR? ☐ Yes ☐ No
	ADDRESS		CITY	STATE & ZIP
	DATES EMPLOYED FROM: TO:	JOB TITLE		
	REASON FOR LEAVING			
4TH EMPLOYER	COMPANY NAME	PHONE	NAME OF SUPERVISOR	MAY WE CONTACT SUPERVISOR? ☐ Yes ☐ No
	ADDRESS		CITY	STATE & ZIP
	DATES EMPLOYED FROM: TO:	JOB TITLE		
	REASON FOR LEAVING			

REFERENCE

LIST BELOW THREE PERSONS NOT RELATED TO YOU WHO HAVE KNOWLEDGE OF YOUR WORK PERFORMANCE.

REFERENCE 1	FIRST NAME	LAST NAME	PHONE	# OF YEARS ACQUAINTED
	COMPANY		OCCUPATION	
	ADDRESS		CITY	STATE & ZIP
REFERENCE 2	FIRST NAME	LAST NAME	PHONE	# OF YEARS ACQUAINTED
	COMPANY		OCCUPATION	
	ADDRESS		CITY	STATE & ZIP
REFERENCE 3	FIRST NAME	LAST NAME	PHONE	# OF YEARS ACQUAINTED
	COMPANY		OCCUPATION	
	ADDRESS		CITY	STATE & ZIP

Applicant Acknowledgement and Authorization

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

_____ Should a search of public records be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below. "Public records" are defined by California state law and means records documenting an "arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment." (Civil Code section 1786.53) Any public records request conducted by internal personnel employed by the Company will only be used to the extent allowed by federal, state, or local law.

☐ **I waive receipt of a copy of any public record described in the paragraph above.**

_____ _____

APPLICANT'S SIGNATURE DATE

Name and number of person completing this form if other than applicant: _____