



EMPLOYMENT APPLICATION

L&S MECHANICAL IS AN EQUAL OPPORTUNITY EMPLOYER. ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

Position Applying For: _____ Date of Application: _____

Full Name: _____

Nickname or other name you've been known as (if applicable): _____

Home Address: _____
Street
City, State & Zip
County

Home Phone: _____ Cell Phone: _____

Other Phone: _____ Email Address: _____

How did you learn about this position? _____

When could you potentially start work? _____ Desired Wage \$ _____

Days/hours available to work: _____

LICENSING & OTHER INFORMATION

Driver License #: _____ State: _____ Expiration Date: _____ Class: _____

Professional Trade License Title: _____ License #: _____

Date License Obtained: _____ Date License Expires: _____

Other training, certifications or licenses held: _____

Are you obligated to perform work for any other employer or are you enlisted in the armed forces requiring special commitments? Yes ___ No ___ If yes, please describe the circumstances: _____

EDUCATION

School Name	Location	Degree Received	Major

EMPLOYMENT INFORMATION (most recent first)

EMPLOYER: _____ **Job Title:** _____

Start Date: _____ **End Date:** _____

Prior Position Held Within Company (if any): _____

Employer Address: _____

Supervisor: _____ **Job Title:** _____ **Phone:** _____

Starting Wage: _____ **Ending Wage:** _____

Duties Performed: _____

Reason(s) for Leaving: _____

EMPLOYER: _____ **Job Title:** _____

Start Date: _____ **End Date:** _____

Prior Position Held Within Company (if any): _____

Employer Address: _____

Supervisor: _____ **Job Title:** _____ **Phone:** _____

Starting Wage: _____ **Ending Wage:** _____

Duties Performed: _____

Reason(s) for Leaving: _____

EMPLOYMENT INFORMATION (continued)

EMPLOYER: _____ **Job Title:** _____

Start Date: _____ **End Date:** _____

Prior Position Held Within Company (if any): _____

Employer Address: _____

Supervisor: _____ **Job Title:** _____ **Phone:** _____

Starting Wage: _____ **Ending Wage:** _____

Duties Performed: _____

Reason(s) for Leaving: _____

EMPLOYER: _____ **Job Title:** _____

Start Date: _____ **End Date:** _____

Prior Position Held Within Company (if any): _____

Employer Address: _____

Supervisor: _____ **Job Title:** _____ **Phone:** _____

Starting Wage: _____ **Ending Wage:** _____

Duties Performed: _____

Reason(s) for Leaving: _____

BACKGROUND/LEGAL

Are you a U.S. citizen, or are you otherwise authorized to work in the U.S. without any restrictions? Yes ___ No ___

Have you ever been convicted of any violation other than a minor traffic violation? Yes ___ No ___ If yes, please provide the date of the incident and detailed information: _____

Have you ever been convicted of a felony? Yes ___ No ___ If yes, please describe the circumstances: _____

Have you ever been involuntarily terminated or asked to resign from a position of employment? Yes ___ No ___

If yes, please describe the circumstances: _____

Have you ever filed a worker's compensation claim? Yes ___ No ___ If yes, please describe the circumstances: _____

ACKNOWLEDGMENT AND AUTHORIZATION

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

It is the intent of L&S Mechanical to provide a safe and drug-free work environment for our customers and our employees. With this goal in mind, employment applicants are subject to a pre-employment drug screen and/or random drug testing while employed with the Company.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date



BACKGROUND CHECK AUTHORIZATION FORM

First, Middle & Last Name: _____				SSN: _____ - _____ - _____	
Current Home Address: _____					
Street		City & State		Zip Code	
How long have you lived at your current address? _____ Provide previous address if less than 5 years					
Previous Home Address: _____					
Street		City & State		Zip Code	
Date of Birth: _____		Driver's License Number: _____		State: _____	
Have you ever been convicted of a crime other than minor traffic offenses? Yes _____ No _____					
If yes, please provide an explanation: _____					
Location & Year of Offense: _____			Offense Type (misdemeanor, felony, etc): _____		
<small>*This information is required in order to conduct an accurate criminal background search and will not be used as criteria in the hiring process as described by the age discrimination act of 1967*</small>					

In connection with my application and/or continued employment, (including contract services) with you, I understand that investigative background inquiries are to be made on myself including consumer investigative criminal convictions. Further, I understand that you will be requesting information from various Federal, State, and other agencies, which maintain records concerning my past activities relating to any criminal experiences.

I acknowledge that I have been counseled that a person or entity may not procure or cause to be prepared an investigative consumer report on any consumer unless it is clearly and accurately disclosed to the consumer, that an investigative consumer report – including all applicable information as to his or her character, general reputation, personal characteristics, mode of living, education history, driving history (including but not limited to accident history, alcohol/drug and any other DOT requirements as permitted by the ADA) employment history and credit history may be made. If you are denied employment because of the consumer investigation, it is your right under the Fair Credit Reporting Act (Law 91-508) SS 606. to have the name of the agency or agencies from whom information concerning you was obtained. You are also entitled to receive free copies of the information supplied by those agencies within sixty days upon written request. You have the right to directly dispute with the consumer reporting agency the accuracy and completeness of any information furnished by that agency.

I authorize without reservation, any party or agency contacted by this employer to furnish the above mentioned information.

I release L&S Mechanical and any other person and/or agencies from any suits, liens, judgments, damage and or/liability resulting from this process. The above information is used solely for inquiries and criminal history checks. Falsifying any information on this release form will constitute grounds for immediate dismissal or declining any pending job offers.

Applicant's Signature: _____

Applicant's Printed Name: _____ Date: _____

Fair Credit Reporting Act Notification You have the right to receive a copy of your consumer credit report should one be requested for employment reasons. By checking this box, I request a free copy of the report