

EMPLOYMENT APPLICATION

Date of Application: _____

Job Applied For: _____



Name: _____ Social Security Number: _____
Last Name First Middle (optional)

Address: _____

Phone Number: _____ Cell/Message: _____

Are you legally eligible for employment in the U.S.A? Yes No (If yes, verification will be required.)

If you are under 18, and it is required, can you furnish a work permit? Yes No

Date available to work: _____ Can you travel if job requires it? Yes No

Are you seeking a full-time position: Yes No Can you work overtime? Yes No

Have you ever applied here before? Yes No If yes, give date(s): _____ Position(s) _____

Have you ever been employed with us before? Yes No If yes, give date(s): _____

How did you hear about this position? _____ Referred by: _____

Can you provide a valid Alaska Driver's License if the job requires it? Yes No

Have you been convicted of a felony crime? Yes No If yes, when and please explain: _____

EDUCATION HISTORY

School Name & Location	Years Completed	Field of Study	Degree/Diploma/Certification
High School			
College/University			
Technical			

WORK EXPERIENCE

List current and former employers beginning with the most recent

From	To	Employer	Phone
Job Title		Address	
Supervisor's Name/Title		Job Title/Duties	
Hourly/Annual Salary/Wage \$ _____ per <input type="checkbox"/> hour <input type="checkbox"/> year		Reason for Leaving:	
From	To	Employer	Phone
Job Title		Address	
Supervisor's Name/Title		Job Title/Duties	
Hourly/Annual Salary/Wage \$ _____ per <input type="checkbox"/> hour <input type="checkbox"/> year		Reason for Leaving:	

No Photocopies – Original Application Only

From	To	Employer	Phone
Job Title		Address	
Supervisor's Name/Title		Job Title/Duties	
Hourly/Annual Salary/Wage \$ per • hour • year Reason for Leaving:			
From	To	Employer	Phone
Job Title		Address	
Supervisor's Name/Title		Job Title/Duties	
Hourly/Annual Salary/Wage \$ per • hour • year Reason for Leaving:			

SKILLS, LICENSES AND OTHER QUALIFICATIONS

REFERENCES

List three professional references we may contact in addition to your current or former employers

<i>Name</i>	<i>Telephone</i>	<i>Relationship</i>	<i>Years known</i>
<i>Name</i>	<i>Telephone</i>	<i>Relationship</i>	<i>Years known</i>
<i>Name</i>	<i>Telephone</i>	<i>Relationship</i>	<i>Years known</i>

I understand if I have falsified, misrepresented or omitted any facts on this application, other employment forms, or during interviews or other employment related conversations, I may be rejected from the application process, disqualified from being hired, or if hired, terminated from employment.

I authorize Klebs Mechanical, Inc., its employees and representatives to conduct reference checks with the references I have provided, in addition to my current employer, my previous employers, and any other individuals, agencies, organizations or companies listed on the Employment Application form, or mentioned during the interview or other employment related conversations.

____ (initials) May we contact current employer? ___ Yes ___ No ____ N/A ____ (initials) If No, permission may be required at a later date.

I understand that once I have been made a conditional offer of employment I may required to have a drug/alcohol test, physical examination, DMV record check, and/or a background investigation check. I understand that if hired, I will be required to supply identity and employment eligibility documents. I understand I may also be required to sign a conflict of interest or non-compete agreement and abide by its terms.

I understand that this Employment Application will only be open for consideration for 14 days. If I wish to be considered for employment after 14 days from the date the form is submitted, I must submit another Application.

I understand that Klebs is an "at-will" employer and that employees are not employed for any specific term and may terminate their employment or be terminated from their employment at any time and for any reason, with or without advance notice and with or without having completed any particular steps of progressive discipline. Nothing contained in any written material nor any oral assurances by anyone at Klebs can change the "at-will" employment relationship. Any change to the "at-will" relationship must be made in writing and signed by the President.

I HAVE READ, UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS ABOVE.

Applicant's Signature _____ *Date* _____

Klebs Mechanical, Inc. is an Equal Opportunity Employer

Rev 9/8/06

Affirmative Action Applicant Tracking Form

Klebs Mechanical, Inc. is an Equal Opportunity Employer and does not discriminate in its employment practices with regard to race, color, sex, religion, national origin, age, marital status, changes in marital status, pregnancy or parenthood, mental or physical disability, veteran status, or any other unlawful characteristics or status.

To help us to comply with government record keeping, reporting, and other legal requirements, please complete the affirmative action data below. Providing this information is voluntary, and this form will be separated from your application and kept in a Separate EEO file.

Date of Application:	Position Applied for:	
Name on Application:	SSN:	Gender:

Referral Source: I learned about the job opening through (check appropriate boxes):

<input type="checkbox"/> State Job Service	<input type="checkbox"/> Media Ad*	<input type="checkbox"/> Web Site*	<input type="checkbox"/> Job Posting*
<input type="checkbox"/> Private Employment Agency*	<input type="checkbox"/> Personal Referral	<input type="checkbox"/> Walk In	<input type="checkbox"/> Other

Name of Agency/Website or Referral Source:

Ethnic Category: (choose only one)

- White (not Hispanic or Latino) – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa
- Black or African American (not Hispanic or Latino) – A person having origins in any of the black racial groups of Africa
- Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race
- Asian (not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or other Pacific Islander (not Hispanic or Latino) – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- American Indian or Alaskan Native (not Hispanic or Latino) – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment
- Two or more races (not Hispanic or Latino) – All persons who identify with more than one of the above five races