



Electric Heating & Air Conditioning

Webb Sanderson Electric, Inc.
214 E. Mulberry
Sherman, Texas 75090

APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE ALL PAGES

Date:

Name:

Last

First

Middle

Maiden

Present Address:

Number

Street

City

State

Zip

How long at present address:

Telephone:

Are you at least 18?

Yes

No

Position applying for:

Asking Salary:

(Be Specific)

Employment desired:

Full-time Only

Part-time Only

Full or Part-time

Days/hours available to work (check all that apply):

No Preference

Thursday

Monday

Friday

Tuesday

Saturday

Wednesday

Sunday

How many hours can you work weekly?

Can you work nights?

When are you available to start work?

<u>Office Applicants Only</u>			
Typing:	Yes	No	Wpm:
10 key:	Yes	No	
MS Word:	Yes	No	
MS Excel:	Yes	No	
Other computer experience:			

EDUCATION

Please Give Complete Mailing Address

Type of School	Name of School	Address	# of yrs. Completed	Major & Degree
High School				
College				
Business Or Trade School				
Professional School				

Have you ever been convicted of a misdemeanor or felony? Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation (if any):

Do you have reliable transportation to work? Yes No

Do you have a driver's license? Yes No Driver's license No.:

State of Issue: Type of License: Operator Commercial Chauffeur

Expiration Date:



Have you had any accidents during the past three years? Yes No How many?

Have you had any moving violations during the past three years? Yes No How many?

Please list two references other than relatives or previous employers:

Name	Name
Position	Position
Company	Company
Address	Address
Telephone	Telephone

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

MILITARY

Have you ever been in the armed forces? Yes No

Are you now a member of the National Guard? Yes No

Specialty:

Date Entered: Discharge Date:

WORK EXPERIENCE

Please list your work experience for the past **five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer:

Address:

Phone No.:

Name of last Supervisor:

Employments dates: From

To

Pay or salary:

Start

Final

Your last job title:

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer:

Address:

Phone No.:

Name of last Supervisor:

Employments dates: From

To

Pay or salary:

Start

Final

Your last job title:

Reason for leaving (be specific):

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Phone No.:

Name of last Supervisor:

Employments dates: From

To

Pay or salary:

Start

Final

Your last job title:

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.



Name of employer:

Address:

Phone No.:

Name of last Supervisor:

Employments dates: From

To

Pay or salary:

Start

Final

Your last job title:

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact your present employer? Yes No

Did you complete this application yourself? Yes No

If not, who did?

Please Read Carefully

Application Form Waiver

In exchange for the consideration of my job application by Webb Sanderson Electric, Inc., (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Webb Sanderson Electric, Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/General Manager of the Company. Both the undersigned and Webb Sanderson Electric, Inc., may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Digital Signature - Follow on-screen prompts.

This Company is an equal employment 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 the Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

Employee Check

(512) 451-2734 Toll Free Hotline (800) 252-8297
Toll Free Fax 1-800-925-2958 Austin, Tx. Fax 512-451-2958
Email: check1@austin.rr.com Online: www.quickbackgroundchecks.com

Pre-Employment Inquiry Release

In connection with my application for employment (including contract for services) I understand that investigative background inquiries are to be made on myself including one or all of the following background searches. Credit report, criminal record, driving record, social security number verification, workers compensation claim search (including claims involving me in the files of insurance companies), education verification, and references from current and previous employers (including my length of employment, position with the employer and my salary information). I further understand that you may be requesting information from various Federal and State agencies, as well as private companies. I authorize, without reservation any contact of these employers or agencies to furnish the above mentioned information (current or previous). I hereby consent to your obtaining the above information from Employee Check and/or any of their employees. I hereby agree not to file any type of lawsuit arising from the information obtained from this background search (including any errors that may arise) or their employees.

Name (print legibly):

Social Security Number:

Date of Birth:

Applicant's Signature

Date:

Applicant's Email Address:

Driver's License #:

State of Issue:

Prospective Employers: Webb Sanderson Electric, Inc.

Date:

Employer's Phone#: (903) 893-4436

Employer's Fax: (903) 813-1618

Employer's Email Address: laura.landes@webbs-tx.com

Background Checks Requested

Criminal Check

Credit report

Worker's Compensation claim search

SSN verification

Driving record