Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résumé, but all questions <u>must</u> be answered.

PERSONAL DATA Name (last, first, middle) Street Address and/or Mailing Address City State Zip Home Telephone Number Business Telephone Number Cellular Telephone Number Do you have a High School Diploma or GED? Yes No Date you can start work Salary Desired Do you have a High School Diploma or GED? Yes No POSITION INFORMATION Check all that you are willing to work Status: Regular Evenings Hours: Full Time Days Swing Status: Regular Evenings Are you authorized to work in the U.S. on an unrestricted basis? Yes No Image: Status: No Image: Status: Have you eart both the usential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job with or without reasonable accommodation? Yes No Image: Status: Have you perform these essential functions of the job with or without reasonable accommodation? Yes No Image: Status: School Name QUALIFICATIONS: Please list any education or training you feel relates to the position and antibuty training: Grave you feel for the would help you perform the work, such as schools, colleges, City/State School Name Image: School Name				
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Hours: Full Time Part Time Days Evenings Swing Graveyard Weekends Status: Regular Temporary Are you authorized to work in the U.S. on an unrestricted basis? Yes No Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job with or without reasonable accommodation? Yes No Can you perform these essential functions of the job with or without reasonable accommodation? Yes No Important QUALLIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training. Degree Address/City/State School School Name Degree Address/City/State				
Part Time Days Evenings Graveyard Weekends Status: Regular Temporary Are you authorized to work in the U.S. on an unrestricted basis? Yes No Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job with or without reasonable accommodation? Yes No QUALLIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, school School School School School Name Degree Address/City/State School School				
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Other				
SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.				
REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.				
Name Address/City/State Phone Relationship				

WORK HISTORY Start with your present or most recent employment and work back. Use separate sheet if necessary. (INCLUDE PAID AND UNPAID POSITIONS)				
Job Title #1	Start Date (mo/day/yr)		End Date (mo/day/yr)	
Company Name	Supervisor's Name		Phone Number	
City	State		Zip	
Duties:				
Reason for Leaving		Starting Salary	Ending Salary	
May we contact your present employer? Yes No N/A				
Job Title #2	Start Date (mo/day/yr)		End Date (mo/day/yr)	
Company Name	Supervisor's Name		Phone Number	
City	State		Zip	
Duties:				
eason for Leaving		Starting Salary	Ending Salary	
Job Title #3	Start Date (mo/day/yr)		End Date (mo/day/yr)	
Company Name	Supervisor's Name		Phone Number	
City	State		Zip	
Duties:				
Reason for Leaving	Leaving		Ending Salary	
Job Title #4	Start Date (mo/day/yr)		End Date (mo/day/yr)	
Company Name	Supervisor's Name		Phone Number	
City	State		Zip	
Duties:				
Reason for Leaving		Starting Salary	Ending Salary	
I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am mployed, false statements, omissions or misrepresentations may result in my dismissal. I authorize Rock Electric Datacom, Inc. to make an investigation of				

employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize Rock Electric Datacom, Inc. to make an investigation of any of the facts set forth in this application and release the Rock Electric Datacom, Inc. from any liability. Rock Electric Datacom, Inc. may contact any listed references on this application. I acknowledge and understand that Rock Electric Datacom, Inc. is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.