

PLUMBLINE MECHANICAL INC

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City

State

ZIP Code

Phone: (____) _____ Phone: (____) _____ E-mail address: _____

Date Available: _____ Desired Salary: _\$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If not, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If so, when? _____

Have you ever been convicted of a felony? YES NO

If Yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references:

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: (____) _____

Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: ____ (____) ____
Address: _____

Previous Employment

Company: _____ Phone: ____ (____) ____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: _\$ _____ Ending Salary _\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: ____ (____) ____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: _\$ _____ Ending Salary _\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: ____ (____) ____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: _\$ _____ Ending Salary _\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____
Rank at Discharge: _____ Type of Discharge: _____
If other than honorable, explain: _____

Disclaimer and Signature

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____