



APPLICATION FOR EMPLOYMENT

LAST NAME		FIRST NAME	MI	TODAY'S DATE
HOME STREET ADDRESS			CELL TELEPHONE	
CITY STATE ZIP			HOME OR OTHER TELEPHONE	
EMAIL ADDRESS		NICKNAME (WHAT YOU PREFER TO BE CALLED):		SOCIAL SECURITY NUMBER
DO YOU HAVE A VALID DRIVERS LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO		DRIVERS LICENSE OR CALIFORNIA ID NUMBER:		DO YOU HAVE TRANSPORTATION TO DRIVE TO WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO
HAVE YOU WORKED FOR US BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO		ARE YOU WORKING NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO		PRESENT (OR LAST) WAGE: \$ _____ PER HOUR
POSITION WANTED <input type="checkbox"/> JOURNEYMAN PLUMBER <input type="checkbox"/> APPRENTICE/TRAINEE <input type="checkbox"/> WAREHOUSE <input type="checkbox"/> OTHER			PAY EXPECTED: \$ _____ PER HOUR	
HOW MANY YEARS OF EXPERIENCE DO YOU HAVE IN THE PLUMBING TRADE? _____ YEARS			DO YOU OWN YOUR OWN HAND TOOLS? <input type="checkbox"/> YES <input type="checkbox"/> NO	
FELONY CONVICTION IN LAST 5 YEARS? (IF YES, EXPLAIN BELOW) <input type="checkbox"/> YES <input type="checkbox"/> NO		IS THERE ANY REASON WHY YOU WOULD NOT BE ABLE TO PERFORM THE PHYSICAL JOB DUTIES EXPECTED OF A PLUMBER? (IF YES, EXPLAIN BELOW) <input type="checkbox"/> YES <input type="checkbox"/> NO		
LIST THE COMPANIES YOU HAVE WORKED FOR. LIST THE MOST RECENT COMPANIES FIRST.				
NAME OF COMPANY- PRESENT EMPLOYER OR MOST RECENT EMPLOYER:		CITY:		TELEPHONE:
NAME OF SUPERVISOR:		WAGE HISTORY: STARTING: \$ _____/HOUR LAST WAGE: \$ _____/HOUR		DATES OF EMPLOYMENT: STARTED: ____/____/____ LEFT: ____/____/____
WHAT KIND OF WORK DID YOU DO?			REASON FOR LEAVING:	
NAME OF COMPANY:		CITY:		TELEPHONE:
NAME OF SUPERVISOR:		WAGE HISTORY: STARTING: \$ _____/HOUR LAST WAGE: \$ _____/HOUR		DATES OF EMPLOYMENT: STARTED: ____/____/____ LEFT: ____/____/____
WHAT KIND OF WORK DID YOU DO?			REASON FOR LEAVING:	
NAME OF COMPANY:		CITY:		TELEPHONE:
NAME OF SUPERVISOR:		WAGE HISTORY: STARTING: \$ _____/HOUR LAST WAGE: \$ _____/HOUR		DATES OF EMPLOYMENT: STARTED: ____/____/____ LEFT: ____/____/____
WHAT KIND OF WORK DID YOU DO?			REASON FOR LEAVING:	
EXPLANATIONS AND FURTHER INFORMATION YOU WISH TO SHARE:				
<p>THE INFORMATION PROVIDED IN THIS APPLICATION FOR EMPLOYMENT IS TRUE, CORRECT AND COMPLETE. IF EMPLOYED, I UNDERSTAND ANY MISTATEMENTS OR OMISSIONS OF FACT ON THIS APPLICATION MAY RESULT IN MY DISMISSAL. I UNDERSTAND THAT ACCEPTANCE OF AN OFFER OF EMPLOYMENT DOES NOT CREATE A CONTRACTURAL OBLIGATION UPON THE EMPLOYER TO CONTINUE TO EMPLOY ME IN THE FUTURE. I UNDERSTAND THAT CAN-AM PLUMBING OPERATES A "DRUG FREE WORKPLACE" AND THAT ALL APPLICANTS WILL BE TESTED FOR DRUGS BEFORE THEY START WORK. I HEREBY GIVE YOU PERMISSION TO CONTACT ANY PERSON, EDUCATIONAL INSTITUTION OR PRIOR EMPLOYER THAT YOU, IN YOUR SOLE OPINION, CONSIDER NECESSARY TO INVESTIGATE MY BACKGROUND, AND HEREBY AUTHORIZE THOSE PERSONS, ET AL, TO RELEASE SUCH INFORMATION TO YOU. I HEREBY RELEASE ALL THOSE PERSONS, ET AL, FROM ANY LIABILITY WHATSOEVER ARISING FROM THE RELEASE OF SUCH INFORMATION TO YOU. IF YOU DECIDE TO ENGAGE AN INVESTIGATIVE CONSUMER REPORTING AGENCY TO REPORT ON MY CREDIT AND PERSONAL HISTORY, I AUTHORIZE YOU TO DO SO. IF A REPORT IS OBTAINED, YOU MUST PROVIDE, AT MY REQUEST, THE NAME AND ADDRESS OF THE AGENCY SO I MAY OBTAIN FROM THEM THE INFORMATION CONTAINED IN THE REPORT.</p>				
DATE _____		SIGNATURE _____		

<i>For Accounting Use Only:</i>	Interviewed By: _____	Hired: Yes / No
	Employee Number: _____	Start Date: _____ Pay Rate: \$ _____