



Prime Electrical Services, Inc.
EMPLOYMENT APPLICATION

Prime Electrical Services is an Equal Opportunity Employer. Please print your information in the spaces provided below.

Personal Information

Date Last Name First Name Middle

Current Address

No. & Street City State Zip

Permanent Address (if different from Current Address)

No. & Street City State Zip

Contact Information

Email Address Business Phone Cell Phone

General Information

Employment Desired

Position applying for: _____

How did you hear about our company and this job opening? _____

General Information (cont.)

Have you ever applied to or worked for Prime Electrical Services? Yes No

If yes, when? _____

Why are you applying for work at Prime Electrical Services? _____

If hired, would you have reliable means of transportation to and from work? Yes No

Are you at least 18 years old (if under 18, hire is subject to verification that you are of minimum legal age) Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the function that cannot be performed _____

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical exam and to a skill and agility test.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.

Education, Training, and Experience

School	Name and Address	No. of Years	Did you Graduate?	Degree or Diploma
High School	_____	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
	Name			
	Address			
	City, State, Zip Code			

Education, Training, and Experience (cont.)

School	Name and Address	No. of Years	Did you Graduate?	Degree or Diploma
College/ University	_____	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
	Name _____			
	Address _____			
	City, State, Zip Code _____			
Vocational/ Business	_____	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
	Name _____			
	Address _____			
	City, State, Zip Code _____			
Health Care Training	_____	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
	Name _____			
	Address _____			
	City, State, Zip Code _____			

Employment History

List below all present and past employment, starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

_____	_____
Name of Employer	Phone Number
_____	_____
Type of Business	Supervisor's Name

Address & Street _____ City _____ State _____ Zip _____

Dates of Employment: _____
From _____ To _____

Current Employer? Yes No

Your Position and Duties

Reason for Leaving

May we contact this employer for a reference? Yes No

Name of Employer _____ Phone Number _____

Type of Business _____ Supervisor's Name _____

Address & Street _____ City _____ State _____ Zip _____

Dates of Employment: _____
From _____ To _____

Your Position and Duties

Reason for Leaving

May we contact this employer for a reference? Yes No

(Note: Attach additional page(s) if necessary.)

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

_____	_____	_____	
First Name	Last Name	Phone Number	
_____	_____	_____	_____
Address & Street	City	State	Zip
_____	_____		
Occupation	No. of Years Acquainted		

_____	_____	_____	
First Name	Last Name	Phone Number	
_____	_____	_____	_____
Address & Street	City	State	Zip
_____	_____		
Occupation	No. of Years Acquainted		

_____	_____	_____	
First Name	Last Name	Phone Number	
_____	_____	_____	_____
Address & Street	City	State	Zip
_____	_____		
Occupation	No. of Years Acquainted		

Application Agreement

Please read carefully, initial each paragraph, and sign below.

Initials

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials

I hereby authorize Prime Electrical Services to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to Prime Electrical Services any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Prime Electrical Services, my former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

Initials

I understand that nothing contained in the application, or conveyed during any interview which may be granted, or during my employment if hired, is intended to create an employment contract between me and Prime Electrical Services. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and Prime Electrical Services' designated representative.

Initials

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Initials

I understand that Prime Electrical Services is a drug-free workplace and that, as part of my application, I will be required to take a drug test. In addition, I understand that, should I not pass the drug test, I will no longer be considered for employment.

The company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Date

Applicant's Signature