



**OLIVER  
MECHANICAL  
INC**

# Job Application

Personal Information			
Last	First	MI	SSN#
Street Address		City	ST Zip
Home Phone	Mobile Phone	Email	Date of Birth
Are you entitled to work in the United States?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you 18 or older?
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain:
Do you have a valid Driver License?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you had your driver's license revoked or suspended in the last 3 years?
Driver's license number			<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:
Military Service?	Branch <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No	Are you a veteran?
What position are you applying for?			How did you hear about this position?
Expected Hourly Rate	Expected Weekly Earnings	Date Available	
Prior Work Experience			
	Current or Most Recent		Prior
Employer			
Address			
City, ST, ZIP			
Telephone			
Name of Immediate Supervisor			
Dates of Employment	From	To	From To
Position/Job Title			
Pay			
Reason for Leaving			
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

Please complete other side

**Education**

	Name/Location	Degree	Major or Emphasis
High School			
College/University			
Trade School			
Other			
List any applicable special skills, training or proficiencies.			

**Personal References**

	Reference 1	Reference 2
Name		
Address		
City, ST, ZIP		
Telephone		

I certify that all information I have provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained by neighbors, friends, former employers, schools, and others. I understand that I have a right to make a written request within a reasonable time from the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation. I authorize the investigation of any or all statements contained in this application and also authorized any person, school, current employer (except as previously noted), past employers and organization named in the application to provide relevant information and opinions that may be useful in making a hiring decision. I release such person and organizations from any legal liability in making such statements. I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GAURANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYEMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITH OUT NOTICE. I have read and understand and by my signature consent to these statements.

Signature	Date
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