

# ALLIED AIRE, INC. HEATING AND AIR CONDITIONING

Employment Application

Date \_\_\_\_\_

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status or any other legally protected class.

APPLICANT INFORMATION			
Last Name	First	Middle	
Street Address		Social Security Number	
City	State	ZIP	
Home Phone	E-mail Address		
Cell Phone	Date Available	Desired Wage	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Do you have any relatives working for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, whom

EDUCATION			
<b>High School</b>		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
<b>College</b>		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
<b>Other</b>		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES: PLEASE LIST THREE PROFESSIONAL REFERENCES.	
<b>Full Name</b>	Relationship
Company	Phone (    )
Address	
<b>Full Name</b>	Relationship
Company	Phone (    )
Address	
<b>Full Name</b>	Relationship
Company	Phone (    )
Address	

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PREVIOUS EMPLOYMENT			
<b>Company</b>		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 <input type="checkbox"/>	NO <input type="checkbox"/>
<b>Company</b>		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 <input type="checkbox"/>	NO <input type="checkbox"/>
<b>Company</b>		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 <input type="checkbox"/>	NO <input type="checkbox"/>
<b>Company</b>		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 <input type="checkbox"/>	NO <input type="checkbox"/>
<b>Please include an explanation of any gaps in employment:</b>			

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<b>MILITARY SERVICE</b>	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

<b>DISCLAIMER AND SIGNATURE</b>	
<p>Are you 18 years of age or older? YES <input type="checkbox"/> NO <input type="checkbox"/> If No, Do you have a valid permit to work? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Have you ever been convicted of a crime? YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, Please explain: _____</p> <p>_____</p> <p>Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, Please explain: _____</p> <p>_____</p> <p>After reviewing the job description for the position applied for, are you able to perform the functions of the job? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, please explain: _____</p> <p>_____</p> <p>After reviewing the job description for the position applied for, are you able to meet the attendance requirements of the job? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, please explain: _____</p> <p>_____</p> <p>I acknowledge that if hired, I will be an at-will employee. I will be subject to dismissal or discipline without notice or cause, at the discretion of the employer. I also understand that this means I am free to quit my employment at any time, for any reason, without notice. I understand that no representative of the company, other than the president, has authority to change the terms of the at-will relationship and that any such change can occur only in a written employment contract. Initial: _____</p> <p>I authorize Allied Aire, Inc. to conduct a background check, including but not limited to, criminal, credit, employment, education, and references to validate information for my employment. Initial: _____</p> <p>I authorize Allied Aire, Inc. to conduct a driving background check in order to operate company vehicles and equipment as well as to be included for insurance purposes. Initial: _____</p> <p>I authorize Allied Aire, Inc. to conduct a pre-employment physical in order to validate the ability to meet the physical demands of the position. Initial: _____</p> <p>I authorize Allied Aire, Inc. to conduct controlled substance examinations for pre-employment, post accident, random, safety-sensitive, follow-up or reasonable suspicion reasons. Signature: _____</p> <p>I understand that Allied Aire, Inc. follows a light duty return to work program for any workplace injuries and this may alter the duties or scope of work for which I have applied. Signature: _____</p> <p>I certify that my answers are true and complete. If this application leads to employment, I understand that false, incomplete or misleading information in my application or interview may result in my immediate termination. Initial: _____</p>	
Signature	Date

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