## CONSOLIDATED ELECTRICAL SERVICES

Full Service Electrical Contractor

49 Old Acres Rd, Moodus, CT 06469

www.ces-ct.com

Tel: (860) 322-4375 Email: accounting@ces-ct.com

ELC. 0192902-E1

# **EMPLOYMENT APPLICATION**

PLEASE PRINT OR TYPE		Today's	Date:	
First Name	MI	Last Name	Preferred	d Name/Nicknam
Street Address	? Cit	у	State	Zip Cod
Phone	Alternate/ Phone		Email Addre	ss
PLEASE PLACE A CHECK BY YOUR RE	SPONSE OR PROVI	DE THE APPROPR		
Are you interested in: What schedules would you prefer?	Weekdays	Full Time Weekends	Part Time Evenings	Temporary Nights
How did you hear about us?	Walk In	Referral Name:	Advertise ment Where:	Other:
Have you worked for this company before?	No	Yes	Dates:	
Do you know anyone who works here?	No	Yes	Name:	
Desired Pay: Hourly Pay (Minimum, if applicable)	\$	Annual Pay	\$ Minimum	\$ Desired
When are you able to start work?	Date:		_	
In what local area do you prefer to work	?			
Position desired:				

#### PLEASE CHECK YES OR NO TO THE FOLLOWING:

Consolidated Electrical Services is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Consolidated Electrical Services complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Consolidated Electrical Services also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

Are you authorized	to work in the Ur	ited States?		_	Yes	No
compliance with these the Company. In this	e laws, <i>Consolida</i> connection, all off vill be necessary f	<i>ited Electrical</i> if	<i>Services</i> will verify the nent are subject to v	he status of verification o	every individu f the applicant	d in the United States. In all offered employment with it's identity and employment rerify your identification and
Are you under 18 y	ears of age?			-	Yes	No
If yes, can you furnis	sh a work permit?			_	Yes	No
Are you capable of which you are appl	-			_	Yes	No
PLEASE LIST YOU  Massachusetts applica			•	olunteer bas	•	<u> </u>
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### **EDUCATION:**

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			
COLLEGE OR GRADUATE			
OTHER			

### **PROFESSIONAL DESIGNATIONS:**

DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED
DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED

## PROFESSIONAL LICENSES:

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER

## **REFERENCES: Please list three professional references**

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

#### PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

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SIGNED:	DATE:	