# **EMPLOYMENT APPLICATION**

Position Sought <u>Maintenance Techn</u>	nician	Full-Time ⊠ Part-Time □
CAND	DIDATE INFORMATION	ON
Name <u>Smith</u> Last	<b>John</b> First	<b>А.</b> Middle Initial
Address 123 Main Street Street	Cedar Rapids, In	Zip Code
Are you able to perform the essential fun position with or without accommodation Yes No Characteristics No C	nctions of this Are you was? Work Yes D	Social Security Number <u>555-00-1234</u> yilling and able to:  Overtime?  No □  during holidays?
Are you legally eligible for employment in Yes ⊠ No □ Indicate your hours of availability in whic willing to work:	n the U.S.? Provide Yes ∑ Sh you are If Yes:	No ⊠  de a valid Driver's License?  No □  Issuing State: Iowa Type: Driver's
Any ⊠ Mon □ Tues □ Wed □ Thu □ Fri □ All Hours □ Day Shift (7AM – 3PM) ⊠ Afternoons (3PM – 11PM) ⊠ Nights (11PM ·	Sat □ Sun □   When wil	sements: <u>N/A</u> I you be available to begin work? Teeks after offer of employment
Have you ever been convicted of a crime misdemeanor) other than a minor traffic This information may be considered in hiring or jo but will not automatically disqualify you for employees $\square$ No $\boxtimes$	violation? Yes \( \simega \) Nob placement, If yes, ple	
If yes, please explain: N/A		

#### **EDUCATION** School Name Years Did You Degree/ Field of Study Certificate/Diploma & Location Completed Graduate? Cedar Rapids High School High School 4 General Yes High School Diploma Kirkwood A.A.S. Industrial College/University 2 Industrial Maintenance Yes Maintenance Community College Additional N/A N/A N/A N/A N/A

# **EMPLOYMENT HISTORY**

List your most recent employment first, followed by previous job experience(s). Use a separate sheet of paper if needed.

Hy-Vee	Duties:		05/2006	07/2008		
Omaha, NE		ns neatly on shelves, assisted	Reason for Leaving:			
,				· ·		
Telephone:	customers,	customers, and straightened aisles.		Moved to Cedar Rapids		
<i>555-012-3456</i>	Pay: <i>\$6/hr</i>	Supervisor: <i>Tom Jones</i>				
Employer Name & Address:	Job Title: N	/A	Start Date:	End Date:		
N/A	Duties:		N/A	N/A		
,	N/A		Reason for Lea	nving:		
Telephone:	/ // //		N/A			

Other qualifications such as special skills, abilities, or honors that should be considered, including types of computers, software, and other equipment you are qualified to operate or repair:

Diagnostic and repair experience on engines, pneumatic tools, production machines, and motors.

Some knowledge of HVAC systems and basic electrical equipment. Forklift license.

Professional licenses, certifications, or registrations:

Certified Maintenance & Reliability Technician (CMRT), Society for Maintenance & Reliability Professionals

May 2018

#### REFERENCES

List three professional references:

Mike Greene	Cedar Rapids, IA	555-987-2865	mgreene@xyzcorp.com	Shift Supervisor	10
Name	Address	Telephone	E-mail	Occupation	Years Known
Sherri Roberts	Monticello, IA	555-987-2865	sherryroberts@gmail.com	Manager (Hy-Vee)	12
Name	Address	Telephone	E-mail	Occupation	Years Known
Russ Martinez	Cedar Rapids, IA	555-987-1234	russm@kirkwood.edu	Maintenance Profess	sor 2
Name	Address	Telephone	E-mail	Occupation	Years Known

### **NOTICE TO APPLICANT**

I certify that the information contained in this application is true and complete to the best of my knowledge. I understand that falsified statements, misrepresentations, or omissions may be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you. I understand that I may make a written request for information derived from background and reference checks.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. If hired, employment is for no definite period and may be terminated at any time without prior notice. I understand and agree to the information shown above.

John A. Smith 08/15/2018

# **EMPLOYMENT APPLICATION**

Position Sought			Time □ Part-Time □
CAND	DATE INFORMA	TION	
Name			
Last	First		Middle Initial
Address			7' 0 1
Street	City, ST		Zip Code
Phone E-mail		_ Social Security Numb	ber
Are you able to perform the essential fund position with or without accommodations $\square$	? Wo	u willing and able to: ork Overtime? □ No □	
Are you at least 18 years of age? Yes □ No □		rk during holidays? □ No □	
Are you legally eligible for employment in Yes □ No □	110	vide a valid Driver's Lice □ No □	ense?
Indicate your hours of availability in which willing to work:	End	es: Issuing State: lorsements:	
Any □ Mon □ Tues □ Wed □ Thu □ Fri □ All Hours □ Day Shift (7AM – 3PM) □ Afternoons (3PM – 11PM) □ Nights (11PM –	7AM) 🗆	will you be available to	begin work?
Have you ever been convicted of a crime (misdemeanor) other than a minor traffic value of the considered in hiring or job but will not automatically disqualify you for employ Yes   No	felony or Yes Diolation?	u a veteran? No 🏻 please list duty/specializ	zed training:
If yes, please explain:			
	EDUCATION		
School Name	Vears	Did Vo	Degree/

	School Name & Location	Years Completed	Field of Study	Did You Graduate?	Degree/ Certificate/Diploma
High School					
College/University					
Additional					

## **EMPLOYMENT HISTORY**

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List	vour most recent emi	lovment first	. follov	ved by previoi	is iob experier	ice(s). L	Jse a sebai	rate sheet of	baber i	t needed.

Employer Na	ame & Address:	Job Title:		Start Date:	End Date:
		Duties:			
				Reason for Le	eaving:
Telephone:					
		Pay:	Supervisor:		
Employer Na	ame & Address:	Job Title:		Start Date:	End Date:
		Duties:			
				Reason for Le	eaving:
Telephone:					
		Pay:	Supervisor:		
Employer Na	ame & Address:	Job Title:		Start Date:	End Date:
		Duties:			1
				Reason for Le	eaving:
Telephone:					
		Pay:	Supervisor:		
	· ·			onsidered, including types c	of computers,
software, an	d other equipment yo	ou are qualified to ope	erate or repair:		
	licenses, certifications	or registrations:			
Pioressional	incenses, certifications	s, or registrations.			
		REFE	RENCES		
ist three nr	ofessional references:		N INOLO		
List till cc pr	oressional references.				
Name	Address	Telephone	E-mail	Occupation	Years Know
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 Name	 Address	 Telephone	 E-mail	Occupation	Years Knowi
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		NOTICE TO	<b>APPLICANT</b>		
certify that th	e information contained in			my knowledge. I understand that	falsified statements
sering that the	a or madion contained in	and application is true and	a somplete to the best of t	,omicabe. i anacistana tilat	.a.amea acatementa,

misrepresentations, or omissions may be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you. I understand that I may make a written request for information derived from background and reference checks.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. If hired, employment is for no definite period and may be terminated at any time without prior notice. I understand and agree to the information shown above.